

Non-Highway Vehicle Registration Form

Make: _____ Registration #: _____

Model: _____ Year: _____

VIN: _____

Color: _____

Owner Name: _____

DOB: _____ DLN: _____

Address: _____

Telephone: _____

Insurance Co: _____ Policy #: _____

Fee: \$35.00 Date Paid: _____

Inspected By: (Printed) _____

(Signature) _____

Copy of Ordinance Received Yes _____ No _____

Registrant Name: (Printed) _____

(Signature) _____

Date: _____

Valid May 1st through April 30th. (No Proration)

Non-Highway Vehicles

Check off list

Insurance Papers (make copy for file)

Owners drivers license (make copy)

Slow moving emblem

Lights (when moving headlight and tail light must be on.)

Headlight

Brake light

Turn signals

Brakes

4 wheels

Rear view mirror

Red reflectorized warning devices
(front and rear)

Neighborhood vehicle engine displacement under 1200 c.c.