Request for Bicycle License

Please complete this form as much as possible. Print it off and return it to the Nevada Police Department either in person, drop in the drop box out front of building or mail to address above. A license will be sent to the address listed below.

Personal Information:

Name: __________________________________________________________

Address: _______________________________________________________

City: ___________________ State: ________________ Zip: _______________

Phone #: __________________

Bike Information:

Make: ___________________ Model: ___________________________

Boys/Girls: _______ Size: _______________ Speed: _______________

Color: ________________ Serial #: ___________________________

Accessories: ___________________________________________________

License # To Be filled in by Police

Fee per bicycle license is Free

Date: ___________________