

ATV/4 WHEELER

SIDE BY SIDE INFORMATION-TOWN REGISTRATION FORM

DATE _____

AMOUNT PAID _____

NAME _____ CURRENT D.L. _____

ADDRESS _____

4 -WHEELER/ATV _____ REGISTRATION CURRENT _____ INSURED _____

SIDE BY SIDE _____ INSURED _____

CONTACT PHONE# _____

I RECEIVED A COPY OF THE LOCAL LAW REGULATING USE OF LIMITED
USE VEHICLES AND ALL-TERRAIN VEHICLES ON TOWN HIGHWAYS

SIGNATURE _____