

# Marysville Bicycle License Application

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Brand Name: \_\_\_\_\_

Color: \_\_\_\_\_

Serial Number: \_\_\_\_\_

*(see diagram below for serial number location)*

Size of Bike: \_\_\_\_\_

## ***For Police Department Use Only***

Date: \_\_\_\_\_

License Number: \_\_\_\_\_

