



ROCHESTER POLICE DEPARTMENT

23 WAKEFIELD STREET
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"Dedication, Pride, Integrity"

POLICE COMMISSION

DEREK J. PETERS
Chairman
DAVID R. STEVENS
Vice Chairman
LISA M. STANLEY
Commissioner

PAUL R. TOUSSAINT
Chief of Police



BICYCLE REGISTRATION FORM

(Print, fill out and bring to the Police Department)

NAME: (First) _____ (Middle) _____ (Last) _____

ADDRESS: _____

PHONE NUMBER: _____ DATE OF BIRTH: _____

SOCIAL SECURITY NUMBER: _____

BIKE REGISTRATION # _____ BIKE SERIAL # _____

BIKE MAKE: _____ BIKE MODEL: _____ COLOR: _____

PURCHASE DATE: _____ PURCHASE AMOUNT: _____

BIKE DESCRIPTION: (Note any added features, i.e., custom handlebar, seat, shocks, etc)

