



Hamilton Police Service

BICYCLE REGISTRATION

COMPLETE THE FOLLOWING FORM, INCLUDE A PHOTO OF YOUR BICYCLE AND ALL ORIGINAL RECEIPTS

BICYCLE OWNER		HPS OCCURRENCE # (COMPLETE ONLY IF REPORT IS FILED)	
DATE OF PURCHASE	LOCATION OF PURCHASE		VALUE OF BICYCLE \$



BICYCLE DESCRIPTION

MAKE	MODEL	SERIAL # AND/OR PERSONAL IDENTIFYING MARKINGS	SUSPENSION SYSTEM <input type="checkbox"/> FRONT FORKS <input type="checkbox"/> REAR		
TYPE <input type="checkbox"/> BMX <input type="checkbox"/> COLLAPSABLE <input type="checkbox"/> HYBRID <input type="checkbox"/> MOTOCROSS <input type="checkbox"/> MOUNTAIN <input type="checkbox"/> RACING <input type="checkbox"/> RECUMBENT <input type="checkbox"/> TANDEM <input type="checkbox"/> TOURING <input type="checkbox"/> TRICYCLE <input type="checkbox"/> UNICYCLE <input type="checkbox"/> OTHER		STYLE <input type="checkbox"/> ADULT <input type="checkbox"/> CHILD <input type="checkbox"/> YOUTH <input type="checkbox"/> OTHER	HANDLEBARS <input type="checkbox"/> BMX <input type="checkbox"/> HIGH (MONKEY BARS) <input type="checkbox"/> RACER <input type="checkbox"/> MOTOCROSS FLAT <input type="checkbox"/> STANDARD-COMFORT <input type="checkbox"/> OTHER	SEAT STYLE <input type="checkbox"/> BANANA <input type="checkbox"/> BMX (CHILD) <input type="checkbox"/> COMFORT (WIDE) <input type="checkbox"/> PERFORMANCE (NARROW) <input type="checkbox"/> OTHER	FENDER TYPE <input type="checkbox"/> CLIP-ON <input type="checkbox"/> MOUNTED <input type="checkbox"/> NONE
		BICYCLE COLOUR	FRAME SIZE	WHEEL SIZE	

PARTS (ACCESSORIES)

<input type="checkbox"/> AIR PUMP	<input type="checkbox"/> BASKET	<input type="checkbox"/> LOCK	<input type="checkbox"/> MIRROR	<input type="checkbox"/> LIGHT	<input type="checkbox"/> TOOL POUCH	<input type="checkbox"/> GEL SEAT COVER	<input type="checkbox"/> OTHER
<input type="checkbox"/> BELL	<input type="checkbox"/> SADDLEBAG	<input type="checkbox"/> CHILD SEAT	<input type="checkbox"/> WATER BOTTLE HOLDER	<input type="checkbox"/> STUNT PEGS	<input type="checkbox"/> TRAILER	<input type="checkbox"/> HANDLEBAR ENDS	
<input type="checkbox"/> CHAIN GUARD	<input type="checkbox"/> HORN	<input type="checkbox"/> KICKSTAND	<input type="checkbox"/> ODOMETER-COMPUTER	<input type="checkbox"/> RACK	<input type="checkbox"/> TRAIL-A-BIKE		

ADDITIONAL COMMENTS



FOR ASSISTANCE COMPLETING THIS FORM AND TO HAVE A PHOTO TAKEN OF YOUR BICYCLE PLEASE VISIT ONE OF OUR COMMUNITY POLICING CENTRES. FOR LOCATIONS CALL 905 546-4900 OR VISIT WWW.HAMILTONPOLICE.ON.CA

REMEMBER TO STORE THIS FORM IN A SAFE LOCATION