

CALIFORNIA BICYCLE LICENSE APPLICATION (CVC 39001)

SERIAL NO.	OWNER (PRINT LAST NAME FIRST)			LICENSE NO.	
ADDRESS (NUMBER AND STREET)			AGENCY		
CITY		ZIP CODE			
HOME PHONE	SCHOOL				
BICYCLE MFGR.	MODEL	TYPE	COLOR		
WHEEL SIZE	FRAME SIZE	DATE ISSUED	DATE EXPIRES	FEE PAID	
TRANSFER OF OWNERSHIP					
NEW OWNER'S NAME				PHONE	
ADDRESS					
SELLER'S SIGNATURE				DATE	
MISCELLANEOUS INFORMATION					

REG 193 (REV. 5/88)