

CITY OF COLLINS

212 Main Street, Collins, IA 50055
641-385-2205

ATV/UTV/Golf Cart Registration Form

Name: _____

Address: _____

Birthday: _____

Phone: _____

Email Address: _____

Who else will be driving this vehicle in your family: **(Must be 18 or older)**

Name: _____ DOB _____

Name: _____ DOB _____

Name: _____ DOB _____

Name: _____ DOB _____

Vehicle Description: (Circle) ATV UTV Golf Cart

Year: _____ Color: _____ VIN# _____

IA Registration # _____ Expiration Date _____

****Must be displayed on your vehicle at all times***

Insurance Carrier: _____

Policy # _____

Expiration Date: _____

Signature

Date

\$25.00 Registration Fee Collected (Circle)

YES

NO

City Clerk Signature: _____ Date: _____