COUNTY OF KAUAI

DIVISION OF MOTOR VEHICLE & LICENSING
4444 Rice Street, Suite #480, Lihue, HI 96766

BICYCLE APPLICATION FOR REGISTRATION

DMVL OFFICE USE ONLY

DMVL OFFICE USE ONLY

Date - DMVL Rep _____ Written Initials _____ Emblem Number _____

TYPEWRITE OR PRINT IN INK - Illegible and/or Improperly filled application will not be accepted.

Make.: _____ Type: Men's ☐ Women's ☐

Serial No.: _____ Year: _____

Speed: _____ Electric Bicycle: Y ☐ N ☐ Wheel Size: _____

Color: _____ Date Acquired: _____

REGISTERED OWNER OF RECORD:

Name: _____
LAST NAME, FIRST NAME MI

Mailing Address: _____
STREET OR P.0. BOX ADDRESS CITY, STATE, ZIP CODE

X _____ _____
SIGNATURE OF REGISTERED OWNER(S) OF RECORD PRINTED NAME

SIGNATURE OF OWNER being 18 years of age or older, hereby certifies that the serial number furnished above is the actual number taken from the bicycle and that the foregoing statements are true to the best of my knowledge and belief. I understand that the registration fees are non-refundable.

If new bicycle is purchased locally, dealer must countersign. This application is certified to be true and correct.
From Whom Acquired:

_____ _____
Dealer's Name **Signature of Dealer**

*** **MUST BE LICENSED WITHIN FIVE (5) DAYS AFTER DATE OF PURCHASE.**

All bicycles having two tandem wheels that are twenty inches (20") or more in diameter and low-speed electric bicycles as defined under title 15United States Code section 2085 are required to be registered. Bicycles with less than twenty inches (20") in diameter are not required to be registered but owners of such bicycles may pay the permanent registration fee to facilitate the return of recovered stolen bicycles.

PERMANENT REGISTRATION FEE.....$15.00
LOW-SPEED ELECTRIC BICYCLE FEE $30.00
OWNERSHIP TRANSFER FEE..... $ 5.00
FAILURE TO RECORD TRANSFER WITHIN THIRTY (30) CALENDAR DAYS $15.00
TAG REPLACEMENT FEE..... $ 2.00
DUPLICATE CERTIFICATE OF REGISTRATION..... $ 5.00

Mail original with check or money order made payable to the County of Kauai, Director of Finance to the address above.