

Department of Customer Services  
 Division of Motor Vehicle, Licensing & Permits  
 P.O. box 30310 Honolulu, Hawaii 96820-0310

Office Use Only

## APPLICATION FOR DUPLICATE Bicycle/Moped Certificate of Registration

Application accepted and  
 duplicate issued

Date - Clerk

Print plainly or typewrite - Improperly filled application will not be accepted.

To: Director of Customer Services

**Fee \$5.00**

Sir: The Certificate of Registration issued to the undersigned has been

(check one)

lost

stolen

mutilated

or defaced

and I hereby apply for a duplicate.

The bicycle/moped bears \_\_\_\_\_ License Plate No. \_\_\_\_\_

Make \_\_\_\_\_ Body Type: Men's ( ) Women's ( ) Moped ( )

Serial No. \_\_\_\_\_ Year Model \_\_\_\_\_ Speeds \_\_\_\_\_

Registered Owner \_\_\_\_\_

Address \_\_\_\_\_

Street No.

Street

City &amp; State

Zip Code

*Defaced or mutilated  
 certificate must be  
 surrendered with this  
 application.*

Personal Signature of Registered Owner