

## City and Borough of Sitka

## Police Department

304 Lake Street, Suite 102 • Sitka, Alaska 99835 Robert Baty Phone 907-747-3245 Chief of Police Fax 907-747-1075



## All-Purpose Vehicle Permit Application

		Own	er Inform	ation			
Owner's Full Name:			Date of Birth:		Drivers License # and Expiration:		
Co-Owner's Full Name:			Date of Birth:		Drivers License # and Expiration:		
Phone #:			Email Address:				
Mailing Address:			1				
Physical Address:							
All-Purpose Vehicle Information							
Serial Number (VIN):		Alaska Registration # and Expir			on:		
Year:	Make:	Model:		Color:			
Additional Identifying	Features:		•				
Insurance Provider and Policy #:							
Printed Name:	Signature:	Signature:				Date:	
Printed Name:	Signature:	Signature:				Date:	
Ap	oplication fee of \$10	00, payable b	y cash or c	heck made	out to the (	City of Sitk	ĸa.
All-F	Purpose Vehicle	Permit is to	be place	d in the c	enter of the	he rear fe	ender.
		(	Official U	se			
Safety Pre-Inspection Person and Date:  CBS Safety Inspection Date:						Date:	
Permit Number: Permit Expiration:		Receipt Number:		mber:			
Issuing Officer:		Signature:	Signature:			Date:	