	NAME			DL NUMBER				DOB	CLASS
DRIVER									
	RESIDEN	T COMML	JTER W	EC F.	ACULTY	STAFF	0	THER	
	DECAL NUMBE	ER LICENSE PLA	TE NUMBER	STATE			VIN #		
VEHICLE #1									
E	YEAR	MAK	MAKE		MODEL			COLOR	
НІС									
/E				VEHICLE S	TYLE				
	2-DOOR	3-DOOR	4-DOOR	SUV	PICKU	P			

VEHICLE REGISTRATION FORM

VEHICLE STYLE									
2-DOOR	3-DOOR	4-DOOR	SUV	PI					