

# **CITY OF IRETON**

**P.O. Box 130 502 4<sup>th</sup> ST**

**Ireton, IA 51027**

## REGISTRATION FOR ATV/UTV VEHICLES FOR USE IN CITY OF IRETON CITY LIMITS

Owner Name \_\_\_\_\_  
(Print Name)

Owner Address \_\_\_\_\_  
(Print street address)

\_\_\_\_\_  
(City, State and Zip)

Vehicle VIN Number: \_\_\_\_\_

County registration # \_\_\_\_\_

Color and description: \_\_\_\_\_

Insurance Company: \_\_\_\_\_  
(Name of company you have auto with)

Valid Driver's License Number: \_\_\_\_\_

\_\_\_\_\_  
(List any family members that will be driving vehicle)

Signature of owner: \_\_\_\_\_ Date \_\_\_\_\_

Date Registered with City: \_\_\_\_\_

Registered Number: \_\_\_\_\_

City Clerk Signature and date \_\_\_\_\_