LAGUNA NUEVA VEHICLE REGISTRATION FORM

Unit No. *ID No. Vehicle Owners Name Type of vehicle

_____ _____ _____ _____

Year Make Model Color Plate No. State Exp. Date

____ _____ _____ _____ _____ _____ _____

Unit No. *ID No. Vehicle Owners Name Type of vehicle

_____ _____ _____ _____

Year Make Model Color Plate No. State Exp. Date

____ _____ _____ _____ _____ _____ _____

Unit No. *ID No. Vehicle Owners Name Type of vehicle

_____ _____ _____ _____

Year Make Model Color Plate No. State Exp. Date

____ _____ _____ _____ _____ _____ _____

Unit No. *ID No. Vehicle Owners Name Type of vehicle

_____ _____ _____ _____

Year Make Model Color Plate No. State Exp. Date

____ _____ _____ _____ _____ _____ _____

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* ID No. to be issued by AMS.

Please provide a copy vehicle registration and proof of insurance.