



City of Caribou, Maine

Municipal Building
 25 High Street
 Caribou, ME 04736
 Telephone (207) 493-3324
 Fax (207) 498-3954
 www.cariboumaine.org

Vehicle Certification

Business Name:
Owner's Name:

This form must be filled out completely and signed by a reputable garage and submitted to the Chief of Police (or designee) for approval before license is granted.

Registration #		Serial #	
Motor #	Year	Model	Style
Color	H.P. (cyl.)	Capacity	Wt.

Condition Of:

Lights		
Brakes	2 Wheel	4 Wheel
Hand Brakes	Steering Mechanism	
Mirrors (Inside)	Mirrors (Outside)	
Windshield Wipers		
Horn or Signal Device		
Front Signal Lights	Rear Signal Lights	
If Truck: Mechanical Condition:	Gross Weight	

If Automobile: Is Mechanical Condition such as to guarantee the safe transportation of passengers

Signed: _____ Print: _____

By: _____
 (Name of Garage)

FOR OFFICE USE:

Approved: _____

Rejected: _____

Reason: _____

Date: _____ By: _____, Chief of Police (or designee)

