

WD #	Water District Name
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VEHICLE #2

ID INSURANCE COVERAGE?

YES NO

VIN Number		Odometer	Year
Make	Model	Weight	Plate No.
Date Acquired		Vehicle Cash Value	

Vehicle Type (select one)

- | | |
|---|--|
| <input type="checkbox"/> Motorcycle (street legal) | <input type="checkbox"/> Bus/Van (over 15 passenger) |
| <input type="checkbox"/> Passenger Car | <input type="checkbox"/> fire fighting vehicle |
| <input type="checkbox"/> Passenger Van (15 passenger or less) | <input type="checkbox"/> Trailer, large (over 1 ton) |
| <input type="checkbox"/> Pickup/Van/SUV | <input type="checkbox"/> Semi tractor |
| <input type="checkbox"/> Cargo/Delivery (under 1 ton) | <input type="checkbox"/> ATV or off-road motorcycle |
| <input type="checkbox"/> Trailer (under 1 ton) | <input type="checkbox"/> heavy equipment |

Vehicle Class (select one)

- Class 1: Passenger vehicles, pickups, and vans under 1 ton.
- Class 2: Vehicles over 1 ton or having special equipment of high value or trailers, either small or large utility or flat beds, either open or enclosed and licensed for road use.

Special Equipment: List and describe all special equipment (non-standard) that is permanently attached to the vehicle.

Item	Description	Value

Coverage Start Date	Coverage End Date (leave blank unless vehicle will be disposed of during the year. Enter date vehicle will be removed from WD use.)
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Entry Date (date form was completed)

Modified/Changed (date form was modified/changed)