## RENEWAL REGISTRATION

Owner(s):  Address:  Mailing Address: (if different)			
		Plate #:	Make/Model:
		Plate #:	Make/Model:
	Make/Model:		
Plate #:	Make/Model:		
Plate #:	Make/Model:		
Dump Sticker: Signature:	Y N  ckers and Transfer Station decal will be mailed to you.		
Include a sig	PAYMENT OPTIONS  ned check made out to the TOWN OF BOSCAWEN  OR pay with card information below  ease note there is a 2.95% bank charge to process cards)		
NAME ON CARD: _			
CARD#			
EXPIRATION:	/		
CVC CODE:	_		