



NAGOG WOODS COMMUNITY CORPORATION

VILLAGE OF NAGOG WOODS  
ACTON, MASSACHUSETTS 01718  
OFFICE: (978) 263-4887 FAX: (978) 263-8063

Village of Nagog Woods  
Motor Vehicle Registration Application

Unit Address: \_\_\_\_\_

Vehicle 1

Owner Name: \_\_\_\_\_

License Plate #: \_\_\_\_\_

State: \_\_\_\_\_

Year: \_\_\_\_\_

Make: \_\_\_\_\_

Model: \_\_\_\_\_

Color: \_\_\_\_\_

Unit Owner Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please indicate in this box which vehicle should be removed from our Vehicle Registry System and replaced with new vehicle information on the left:

\_\_\_\_\_  
\_\_\_\_\_

*Thank you*

Vehicle 2

Owner Name: \_\_\_\_\_

License Plate #: \_\_\_\_\_

State: \_\_\_\_\_

Year: \_\_\_\_\_

Make: \_\_\_\_\_

Model: \_\_\_\_\_

Color: \_\_\_\_\_

Unit Owner Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please indicate in this box which vehicle should be removed from our Vehicle Registry System and replaced with new vehicle information on the left:

\_\_\_\_\_  
\_\_\_\_\_

*Thank you*

PLEASE FILL OUT THIS FORM AND RETURN TO THE OFFICE VIA EMAIL OR THE VILLAGE SLOT AT THE POSTAL KIOSK.