



H.O.G.® Mileage Form



RIDER NAME _____ H.O.G. # (including Country Code)

Mailing Address _____

City/ State _____ **Zip or Postal Code** _____

PASSENGER NAME _____ H.O.G. # (including Country Code)

Mailing Address _____

City/ State _____ **Zip or Postal Code** _____

IMPORTANT NOTE: Each Harley-Davidson® motorcycle must be enrolled prior to accumulating miles in the program. (VIN = Vehicle Identification Number)

FILL OUT THIS SECTION TO: **ENROLL (start new in the Mileage Program)**

OR

ADD additional bike(s) to the program

VIN _____ **Starting Odometer:** _____ Miles Kilometers

VIN _____ **Starting Odometer:** _____ Miles Kilometers

FILL OUT THIS SECTION TO: **REPORT MILEAGE for enrolled bike(s)**

OR

REPORT MILEAGE for bike(s) sold

VIN _____ **Current Odometer:** _____ Miles Kilometers

VIN _____ **Current Odometer:** _____ Miles Kilometers

VIN _____ **Current Odometer:** _____ Miles Kilometers

(AN ENTRY SHOULD BE MADE IN BOTH SECTIONS ABOVE TO REPORT A VEHICLE TRADE)

DEALER ENDORSEMENT (REQUIRED):

Dealer Name _____ **Dealer #:** _____

Dealer Signature _____ **Date** _____

(I hereby certify that the information on this form is correct.)