



## POV APPLICATION FORM

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Please fill out this form to the best of your ability. This form will be used by Faction Commanders to choose which POV's are accepted for use in American Milsim events based on capabilities and usefulness in relation to other vehicles. Please email this form and all other required documentation to [POVAPP@americanmilsim.com](mailto:POVAPP@americanmilsim.com)

Owners Name:

Operator/Drivers Name:

Make:

Model:

Insurance Provider:

Faction UFS/CoST:

In the following box, please indicate if you vehicle has the following: Headlights, Turn Signals, Break Lights, Hazard Lights, Tail Lights, Spot Lights, Blackout Lights, CB Radio, CB Antenna, Radio on Faction Freq's, Seatbelts, Spare Tire, 4 Wheel Drive, Firing Positions no less than 18"x12", First Aid Kit

In the following box please give a detailed description of your vehicles, its capabilities and your vision for how it is to be used in the game:

Proof of Insurance  
Photos of your POV