

GOLF CART PERMIT APPLICATION

APPLICANT INFORMATION:

Applicant Name: _____

Applicant Address: _____

Applicant Phone Number: (Home) _____ (Cell) _____

Applicant Driver's License: (Number) _____ (State) _____

(Expiration Date) _____

GOLF CART AND INSURANCE INFORMATION:

Year: _____ Make: _____ Model: _____

Vehicle Identification Number/Serial Number: _____

Liability Insurance Carrier: _____ Policy Number: _____

Under penalty of perjury, I declare this Golf Cart is insured with the company named above and I will maintain liability insurance as follows throughout the permit period: \$25,000 for bodily injury or death per person; \$50,000 total for bodily injury or death per accident; \$25,000 for property damage.

Applicant Signature: _____ Date: _____

(Inspector Use Only)

- | | |
|--------------------------|---|
| <input type="checkbox"/> | Operational Headlights (two required) |
| <input type="checkbox"/> | Operational Brake Lights (two required) |
| <input type="checkbox"/> | Turn Signals |
| <input type="checkbox"/> | Windshield |

Notes: _____

Inspector Printed Name: _____

Inspector Signature: _____ Date of Inspection: _____

****\$25.00 permit fee is paid to the Town Clerk after the inspection****

Permit fee collected by: _____

Receipt number: _____ Permit Issue Date: ____/____/____