

**Village of Blue Mound**

**Golf Cart application Form**

Owner Name: *	<input type="text"/>
Owner Address: *	<input type="text"/>
Owner Date of Birth *	<input type="text"/>
Owner Phone #: *	<input type="text"/>
Owner Cell Phone #: *	<input type="text"/>
Vehicle Make: *	<input type="text"/>
Vehicle Model: *	<input type="text"/>
Vehicle Year: *	<input type="text"/>
Vehicle VIN#: *	<input type="text"/>
Insurance Co.: *	<input type="text"/>
Insurance Policy #: *	<input type="text"/>
Insurance Expiration Date: *	<input type="text"/>
Emergency Contact Name: *	<input type="text"/>
Emergency Contact Phone #: *	<input type="text"/>
Emergency Contact Address: *	<input type="text"/>

**Permits**

- A. No person shall operate a motorized golf cart without obtaining a permit from the Police Dept.
- B. Permits shall be granted for a period of one (1) year from April 1 to March 31 and may be renewed annually.
- C. The annual cost of a permit is Seventy-Five (\$75.00) per golf cart, to cover the costs of implementing and maintaining this article, and shall be paid to the Village Clerk by the applicant.
- D. Insurance coverage shall be verified as in effect by the Police Department when issuing or renewing a permit.
- E. After completion of the application and payment of the requisite fee, the applicant shall present the golf cart to the Chief of Police, or his designee, for an inspection to determine whether the golf cart may be operated on a Village street, public parking lot.

Last Name First Name MI Driver's License Number

\_\_\_\_\_ Is Driver's License current and active? YES NO

Physical Street Address (No PO Boxes)

\_\_\_\_\_

Date of Birth (Must be at least 18 years old)

\_\_\_\_\_

Golf Cart Make Model Color

\_\_\_\_\_

Under penalties of perjury, I declare that I have examined the application and all supporting documents submitted by me in connection therewith, and to the best of my knowledge, they are true, correct, and complete.

\_\_\_\_\_

Signature Date

This section to be completed by Chief of Police or Official Representative

\_\_\_\_ Applicant is at least 18 years of age \_\_\_\_ Cart has working horn

\_\_\_\_ Applicant has valid driver's license \_\_\_\_ Cart has working brakes and brake lights

\_\_\_\_ Applicant has valid liability insurance \_\_\_\_ Cart has working turn signals

\_\_\_\_ Applicant submitted copy of liability insurance card \_\_\_\_ Cart has steering wheel, tires, and rear view mirror

\_\_\_\_ Applicant has paid application fee in full \_\_\_\_ Cart has working white headlights and red tail lights

\_\_\_\_ Applicant has submitted signed Waiver of Liability form \_\_\_\_ Cart has "Slow Moving Vehicle" triangle emblem mounted on rear.

If all required documentation is submitted, all forms complete, all spaces on this form checked, and application fee is paid, applicant shall be approved for permit.

Approved Denied

\_\_\_\_\_

If denied, list reason for denial.

\_\_\_\_\_

Inspection completed by \_\_\_\_\_ Date \_\_\_\_\_