HCV Golf Cart Permit

		Permit #	
		Fee: \$50	
		Receipt# Date Paid	
		Received By	
Applicant Name:		Email	
		State:	
Phone Number: (Home)	(Work)	(Cell)	
Applicant Driver's License: (Nu	ımber)	(State)	
GOLF CART INFORMATIO	N		
Year: Make:	Model:	Color:	
Vehicle Identification Number /	Serial Number:		
Electric or Gas:	License Plate #		
Insurance Company	Policy #		
(Inspector Use Only)			
REQUIRED INSPECTION IT	ГЕМS:		
Head Lamps (2 Required)	Electric Horn	(Audible at 200')	
Tail Lamps (2 Required)	Rear View Mirror	(Unobstructed view of 200')	
Slow Moving Emblem	Parking Brake	Seat Belts	
Side Reflectors-Each Side (From	nt-amber / Back-red)	Muffler System (gas)	
Speed (not to exceed 25MPH)_	License Plate		
Notes:			
Inspector Printed Name:			
Inspector Signature:		_	
Date of Inspection:			
I have been provided Golf Cart	Ordinance 1223 and I will o	comply. Initials	
\$50 Permit fee is paid to the prinspection **\$10 for re-insp		ntry Village City Hall after the	