



**PERMIT APPLICATION**

UTV/Golf Cart

Permits issued each fiscal year from May 1 to April 30

**Permit Registered Owner**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ DOB: \_\_\_\_\_

Email Address: \_\_\_\_\_

Driver's License Number (Attach copy): \_\_\_\_\_

**Additional Operator** (Any additional operators may be listed on second page)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ DOB: \_\_\_\_\_

Email Address: \_\_\_\_\_

Driver's License Number (Attach copy): \_\_\_\_\_

**UTV/Golf Cart Information**

Make: \_\_\_\_\_

Model: \_\_\_\_\_

Color: \_\_\_\_\_ Year: \_\_\_\_\_

VIN/Serial Number: \_\_\_\_\_

**Insurance Information (Attach Proof of Insurance)**

Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_

---

*FOR OFFICE USE ONLY*

Permit Number Issued: \_\_\_\_\_ Permit Year: \_\_\_\_\_

Date Issued: \_\_\_\_\_

Fee Received:

\$75 (First Time)     \$50 (Annual Renewal)     \$0 Special Event     \$0 Government Use

Paperwork Scanned:

**Additional Operator**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ DOB: \_\_\_\_\_

Email Address: \_\_\_\_\_

Driver's License Number (Attach copy): \_\_\_\_\_

**Additional Operator**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ DOB: \_\_\_\_\_

Email Address: \_\_\_\_\_

Driver's License Number (Attach copy): \_\_\_\_\_

**Additional Operator**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ DOB: \_\_\_\_\_

Email Address: \_\_\_\_\_

Driver's License Number (Attach copy): \_\_\_\_\_