

APPLICATION AND PERMIT TO OPERATE A GOLF CART IN THE TOWN OF RIDGEVILLE (NEW)

OWNER:		
ADDRESS:		
PHONE:		
Vehicle Make/Model/Year/Color	<u>:</u>	
VIN or Serial Number of Vehicle	<u>:</u>	
	<u>INSPECTION</u>	
Item/Compliance	Passed/Yes	Failed/No
BRAKES		
SLOW MOVING VEHICLE SIGN		
SAFETY FLAG (min height 5 ft. f	rom street surface).	
REARVIEW MIRROR		
OWNER RECEIVED COPY OF T	OWN ORDINANCE	
TAIL/HEAD LIGHTS		
PROOF OF LIABLITY INSURA	ANCE: Attach Copy to Sheet	
PERMIT ISSUED:	PERMIT NUMBER:	
OFFICER SIGNATURE:	_	
OFFICER'S BADGE NUMBER	:	
DATE OF INSPECTION/APPRO	OVAL:	