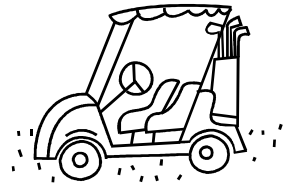




City of Center Point, Iowa
Annual Golf Cart Registration Form



Owner Information

Name _____
Address _____
Phone # _____ Email: _____

Applicant Information (if different from owner listed above)

Name _____
Address _____
Phone # _____

Cart Information

Year _____ Make _____ Power (check one): Gas Electric
Number of wheels _____ Number of Passenger seats: _____
Serial Number _____ Color _____

Location Cart Stored (if different from owner's residence listed above)

It is the responsibility of the cart owner to maintain liability insurance on the cart and to be able to prove such liability is in force at all times. A copy of proof of insurance must also be attached to this application.

Attached? Yes No

Operation of golf carts is allowed only by persons possessing a valid driver's license. A copy of applicant's driver's license must be attached to this application.

Attached? Yes No

By signing this application I agree that I have received a copy of Ordinance 407 & 496 and Iowa Code Section 321.247. I also understand that it is my responsibility to comply with all rules and regulations regarding the operation of Golf Carts upon City streets as set by the City of Center Point and the State of Iowa.

Signature _____ Date _____

Registration Fee (\$25.00) Receipt # _____

Permit issued by: _____

This application valid from March 1, 20____ to November 30, 20____