Town of Rossville Permit # **GOLF CART REGISTRATION APPLICATION** ☐ New ☐ Renewal Name of Cart Owner: Address: Phone Number: 1.) Name(s) of Principal Driver(s): 2.) (if different than owner) 3.) 1.) State: Exp. Date: **Drivers License** Number(s) with 2.) State: Exp. Date: Expiration Date(s) for Driver(s) 3.) State: Exp. Date: Manufacturer of Golf Cart: Model Number: **Identification Number:** Color: I understand all required equipment will be maintained in working order, and the golf cart is to be operated in accordance with the applicable provisions in the Indiana traffic code and the Town of Rossville Ordinance. I further understand any violation of these provisions and requirements may result in the permit being revoked. Signature Required: Initial I understand the application for a permit to operate a golf cart shall not be approved until the vehicle has been inspected and approved. Initial I certify that I have the proper insurance coverage to operate the above golf cart on the public streets within the Town of Rossville, Indiana. Cash \square Money Order A non-refundable \$50 application or renewal fee must accompany this form. **INSPECTION - Location at Rossville Police Department** (Lower section for Town of Rossville Police Department use only.) YES NO Operative Inoperative **Head Lights** Insurance Requirement Met Brake Lights Valid Driver's License Turn Signals Hold Harmless Agreement Slow Moving Vehicle Sign Valid for After Dark Operation **Full Rear View Mirror** PERMIT ISSUED PERMIT NUMBER: Valid Until: ☐ YES PERMIT ISSUED BY: Date Issued:

REASON FOR DENIAL: