



113 N. MAIN ST., P.O. BOX 147, KIRKLIN, INDIANA 46050-0147
 PHONE 765-279-8786

GOLF CART PERMIT APPLICATION

OWNER: _____

ADDRESS: _____

PHONE: _____

OWNER DL STATE & NUMBER: _____

VEHICLE MAKE / MODEL / YEAR: _____

VIN / SERIAL #: _____

INSPECTION FOR REQUIRED EQUIPMENT

ITEM/COMPLIANCE	PASSED	FAILED
BRAKES OPERATIONAL		
BRAKE LIGHTS OPERATIONAL		
SLOW MOVING VEHICLE SIGN		
SAFETY FLAG		
REAR VIEW MIRROR		
MANUFACTURER VIN PLATE IN PLACE		
FRONT AND REAR REFLECTORS		
2 OPERATIONAL HEADLIGHTS (OPTIONAL)		
PROOF OF LIABILITY INSURANCE		

INSURED BY (COMPANY NAME): _____

ADDRESS: _____

PHONE NUMBER: _____

POLICY COPY ATTACHED: YES NO

OWNER PROVIDED WITH GOLF CART ORDINANCE COPY: YES NO

PERMIT: ISSUED DENIED DATE: _____

EXPIRES: _____

ISSUING OFFICER SIGNATURE / BADGE: _____

GOLF CART OWNER LIABILITY RELEASE (READ AND SIGNED BY OWNER)

The Town of Kirklin, Kirklin Town Council, Town of Kirklin Clerk/Treasurer, Kirklin Police Department and all Kirklin Town Employees will assume no liability after issuing of said Golf Cart Permit. The Town of Kirklin cannot be held responsible for any operator actions while operating the golf cart on Town streets, roadways, and/or alleys. The Town of Kirklin cannot be held responsible for any deaths, injuries, or any other damage to the street, roadway, or alley in the Town of Kirklin.

OWNER LIABILITY COMPLIANCE CERTIFICATION

I, THE UNDERSIGNED OWNER, HAVE READ THE ABOVE LIABILITY STATEMENT. I UNDERSTAND IT AND AGREE TO IT'S TERMS. BY SIGNING BELOW, I AGREE TO ABIDE BY ALL RULES AND REGULATIONS FOR OPERATION OF A GOLF CART IN THE TOWN OF KIRKLIN

OWNER SIGNATURE: _____ DATE: _____