For	Office I	Ise Onl	VPSANS		erente propie		ansonie La			
	\$50.00	D	ate Paid:	A MARKET		WITH THE STATE OF	Evn	iration D	ofe	
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## APPLICATION FOR GOLF CART PERMIT

Name:		Date:	
Driver's License Number		Expiration Date:	
Permanent Address:			
Phone number:			
A copy of driver's license and proof of insuran provide these documents will result in the pern necessary equipment as set out below has been will be issued.	nit being denied.	Applicant will also need to provide pro	of that
The permit will be issued in the form of an all-passenger side.	weather sticker,	to be affixed to the rear of the golf cart	on the
Requirements:			
<ul> <li>o Slow moving vehicle sign.</li> <li>o Bicycle safety flag.</li> <li>o Adequate brakes.</li> <li>o Turn signals/if installed by Manufacto</li> <li>o Brake lights.</li> </ul>	urer		
Prohibitions:			
Golf Cart WILL NOT be op Golf Cart WILL NOT be op Golf Cart WILL NOT be ope	erated on any sec	ction of State Highway 51	
*** All golf carts operated	on City streets ar	e subject to motor vehicle laws. ***	
have read and understand the provisions and rurther understand that a violation of these rules or the Postville Police Department to inspect most ville Ordinance 661-11 prior to issuance of	s may result in a ny golf cart to en	\$50.00 fine plus court costs. I also give	permission
Signature			Date
Approved/Denied		Approved/Denied	
ostville Police Department	Date	Administrator or Deputy Clerk	Date