

CITY OF CONESVILLE, IOWA PERMIT FOR GOLF CARTS

Permit # _____ VALID JAN. 1- DEC. 31, _____

APPLICANT INFORMATION

Name: _____
Physical Address: _____
Mailing Address: _____
Home Phone: _____ Cell Phone: _____
Date of Birth: _____ DL# & Exp.Date: _____

GOLF CART INFORMATION

Make: _____ Color: _____
Model: _____
Year: _____
Serial Number: _____

Proof of Insurance—Provider: _____
Agent: _____ Ph # _____
Policy # _____

I understand this permit/decal is issued to me and is to be clearly displayed on the left side near the front of the Golf Cart. I understand all drivers must meet requirements of the City of Conesville Ordinance #14 effective 9-11-2012.

Signature of Operator/Owner: _____

Application Approved: _____

Date: _____