

GOLF CART PERMIT CHECKLIST

DATE: _____

PERMIT NUMBER: _____

OWNER: _____

ADDRESS: _____

PHONE: _____

MAKE: _____

MODEL/SN: _____

_____ HEADLIGHTS

_____ BRAKE LIGHTS

_____ TURN SIGNALS (front and rear)

_____ HORN

_____ STEERING WHEEL

_____ SLOW MOVING PLACARD

_____ INSURANCE

_____ NAME OF INSURANCE

_____ POLICY NUMBER

_____ EXPIRATION DATE

ISSUING OFFICER: _____