



TOWN OF BARGERSVILLE
BARGERSVILLE POLICE DEPARTMENT

Golf Cart Permit Registration

Applicant Information

Last Name: _____ First Name: _____ MI: _____

Physical Street Address: _____

City/Town: _____ State: _____ Zip: _____

Applicant's Mailing Address: _____

City/Town: _____ State: _____ Zip: _____

Applicant's Telephone No. Daytime: _____ Nighttime: _____

Driver's License Number: _____ State: _____

Make (Mfg) of Golf Cart: _____ Model/Year: _____

Serial No: _____ Sticker No assigned to Golf Cart: _____

Insurance Certification

Under penalties of perjury, I declare this vehicle is insured with the company named below and I will maintain liability insurance throughout the registration period.

Insurance: _____

I have received, read and understand the "Golf Cart Ordinance." I have paid the registration fee for the above listed car and agree to additional assessments as may be required in support of this ordinance. I acknowledge that I will assume all liability, and am fully responsible for the operation of the above carts on the streets and alleys of the Town of Bargersville. I also acknowledge that the Town of Bargersville is providing this privilege, is in no way endorsing the operation of this cart. I agree to indemnify and hold harmless the Town of Bargersville for any and all liability arising from the use of this golf cart. **I also understand that the Town of Bargersville Police Department's interpretation of all the rules and regulations are final.** I will insure that the assigned proof of compliance will remain visible from the rear of the cart at all times. I furthermore insure that I will obey all the rules and regulations set forth by the Town of Bargersville concerning the operation of a cart within the town limits.

Applicant's Signature

Date

Town Use Only

Driver's License Verified by: _____

Approved by: _____