

**CITY OF MADISON
PERMIT APPLICATION
GOLF CARTS/ATV'S**

GOLF CART OR ALL-TERRAIN VEHICLE

(Fee: \$100.00)

PERMIT NUMBER:

Applicant's Full Name:

Applicant's Street Address:

City, State, Zip Code:

Applicant's Date of Birth:

Valid Driver's License Number:
(Copy Required)

State:

Applicant's Insurance Company:
(Certificate or written verification required)

Applicant's Insurance Policy Number:

Applicant's Insurance Policy Expiration Date:

Applicant's Signature: _____

Date: _____