

City of Montevideo Golf Cart Operators Permit Application

All permits expire Dec. 31<sup>st</sup> of each year.

Name of Applicant: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Address of Applicant: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Do you have Proof of Liability Insurance to Operate Golf Cart on City Streets?: YES \_\_\_\_ NO \_\_\_\_

Name of Insurance Company: \_\_\_\_\_ Policy Number: \_\_\_\_\_

Liability Limits: \_\_\_\_\_ (Attach copy of Certificate of Insurance)

Please answer the following questions:

- 1) Do you presently have or have you had a Minnesota Driver's License?: YES \_\_\_\_ NO \_\_\_\_  
(If yes, please include a copy of the license with this application).
- 2) Have you ever had your license revoked for traffic violations?: YES \_\_\_\_ NO \_\_\_\_

As an applicant for a Golf Cart Operators Permit, I agree to the following:

- 1) I agree to operate only on designated routes from sunrise to sunset. I shall not operate in inclement weather or when visibility is impaired by weather, smoke, fog, or other conditions, or at any time when there is insufficient light to clearly see persons in vehicles on the roadway at a distance of 500 feet.
- 2) I understand that this permit is for travel on city streets only, and does not extend to alleys, county, state, or federal roads or highways, and that not approval is given for travel between the city and the golf course.
- 3) I will display a slow moving vehicle emblem per state statutes and as approved by the city.
- 4) I understand that I have all of the same rights, duties and responsibilities as any other vehicle operated on city streets and I will abide by all state and local statutes, and that I understand that I can be charged or fined for violation of these statutes.
- 5) I am at least 16 years of age.
- 6) I understand that my permit can be revoked by the city if my driver's license is revoked for traffic violations or if I have operated the golf car in an unsafe manner.
- 7) I understand that the city assumes no liability for any injuries to persons or property which may result from my operation of a motorized golf cart.
- 8) I authorize the Montevideo Police Department to verify my driving records and any related information.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**POLICE DEPARTMENT USE ONLY BELOW THIS LINE**

Police Department to Verify:

- 1) Driver's Record and Related Information
- 2) Condition of Golf Cart and Slow Moving Vehicle Emblem
- 3) Provide information on Traffic Regulations
- 4) Completion of Application
- 5) Insurance
- 6) Issue License

Approval by Police Department: \_\_\_\_\_

Date: \_\_\_\_\_