SCOOTER, GOLF CART, UTV, ATV Permit Application

CITY OF GERALD

City Hall

106 E. Fitzgerald Ave.
P.O. Box 59

Gerald, MO 63037

573-764-3340

RENEWAL □ YES □ NO	Date of Application:
Payment: ☐ Cash ☐ Check #	☐ Date Paid
Total: \$	Insp. Completed By:
Permit #:	Completed By:
(All renewals Due January 1st)	

Please Fill Out & I	Includo All	Poguirod In	oformation				
NOTICE TO APPLICANT – (Once inspection	has been complet	ed by the City of Gera			· · · · · · · · · · · · · · · · · · ·	tion, insurance, and application/renewal
forms need to be brought							umhar 31st aach vaar
APPLICANT INFORMATION				January 1st and all permits expire on December 31st each year. SCOOTER, GOLF CART, UTV, ATV INFORMATION			
Name:			Make		Model:		
DOB:		Last 4 of SSN:		VIN Registration #:			
Drivers License #: State:		Color:			# of Seats with Seatbelts:		
Home Address: Street:			Description:				
City: ST: Zip:			INSURANCE INFORMATION				
Mailing Address: Street:			Policy #:				
City: ST: Zip:			Provider				
Phone:		Agent's Name:					
Email:			Agent's Phone/Email:				
Emergency Contact:		INSPECTION COMPLETED BY CITY OF GERALD POLICE ONLY					
Contact Phone:			PASS			SPECTION ITEM	
						Operating front hea	adlights visible from 250 ft min.
PERMIT FEE					-	_	
□ NEW Permit and Registration Fee: \$25.00					Operating taillights	visible from 250 ft min.	
□ RENEWAL Permit and Registration Fee: \$15.00					Operating brake lights visible from 250 ft min.		
SIGNATURE					Slow moving triangle/reflector		
I understand the City of Gerald Ordinance 340.120, pertaining to SCOOTER, GOLF CART, UTV, ATV. By signing below, I agree to operate my SCOOTER, GOLF CART, UTV, ATV in compliance with said City Ordinance and Missouri Statutes. I also understand that violation of					Parking brake		
					Seatbelts installed a	and working property for all seats	
City Ordinance and/or Missouri Statutes may be grounds for revocation of my SCOOTER, GOLF CART, UTV, ATV Permit.		I certify that I have conducted an inspection of the above referenced SCOOTER, GOLF CART, UTV, ATV and that the conditions of the inspection items are accurately reported.					
	Applicant Signature:			Officer Signature:			
Applicant Signature:				Office			
Applicant Signature:							