



# City of Melissa

## Golf Cart Application & Inspection

\*\*\*\*\*NON-TRANSFERABLE\*\*\*\*\*



Location of Inspection: \_\_\_\_\_

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Driver License: \_\_\_\_\_ ST: \_\_\_\_\_ Exp Date: \_\_\_\_\_

### Golf Cart

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_

VIN/Serial Number \_\_\_\_\_ Year: \_\_\_\_\_

Storage Location: \_\_\_\_\_ Electric or Gas: \_\_\_\_\_

### Insurance

Company: \_\_\_\_\_ Policy Number: \_\_\_\_\_

Company Phone: \_\_\_\_\_ Exp Date: \_\_\_\_\_

### Inspection Requirements

- |                         |  |
|-------------------------|--|
| _____ Head Lamps        | _____ Rearview Mirrors                           |
| _____ Tail Lamps        | _____ Parking Break                              |
| _____ Reflectors        | _____ Slow Moving Vehicle Emblem                 |
| _____ Copy of Insurance | _____ Copy of Driver License                     |
|                         | _____ Working Exhaust System (Gas Operated Only) |

\*\*To Be Completed by Inspecting Officer\*\*

### Acknowledgement

I \_\_\_\_\_ do hereby state that I have received a copy of the City of Melissa ordinance Article 10.1100 Operation of Golf Carts on Public Streets

Signature of Owner: \_\_\_\_\_ Date: \_\_\_\_\_

### Certificate of Inspection

Pass: \_\_\_\_\_ Fail: \_\_\_\_\_

Signature of Officer: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*To Be Completed by Inspecting Officer\*\*