



ALL APPLICATIONS TAKE ONE WEEK TO PROCESS.
THERE ARE NO EXCEPTIONS!

LICENSE APPLICATION

Golf Cart License

Name: _____ Date of Birth: _____
(First, Middle Initial, Last)

Street Address: _____
(Street, City, State & Zip)

Telephone Number: (____) _____ - _____

Mailing Address: _____
(Street, City, State & Zip)

Vehicle: _____
(Make) (Model) (Serial Number)

.....
Insurance Company Information:

Name: _____

Address: _____

Telephone Number: (____) _____ - _____

.....
Period for which license is Issued For: From _____ to _____
(Up to three years ending December 31st.)

PLACE YOUR YEARLY STICKER ON THE LEFT REAR FENDER OF YOU GOLF CART. THE ABOVE INFORMATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

Date: _____
Signature of Applicant

Subscribed and sworn to before me
This ____ day of _____, 20____.

Notary Public, State of Wisconsin

My Commission expires _____

\$150.00 fee paid Photocopy of Photo Identification (*Color*)

Staff: After submission of application, the City Clerk and Police Chief will verify before application will be approved.