## CITY OF CHILLICOTHE APPLICATION FOR GOLF CART AND TRAILER PERMIT

DATE:	PERMIT NO
GENERAL INFORMATION Applicant's Name:	Applicant's Address:
Applicant's Phone No Cell No	
Applicant's Driver License No.	State:
INSURANCE INFORMATION	GOLF CART INFORMATION
Insurance Carrier:	Make:
Policy Number:	Model:
ADDITIONAL OPERATORS	Serial Number/VIN:
Name:	General Description:
Address:	
Name:	
Address:	GOLF CART TRAILER INFORMATION
	Occupant: Utility:
	Make:
	Model:
	Serial Number/VIN: General Description:

I acknowledge that I have applied to the City of Chillicothe, Illinois (the "City") for a permit to operate a golf cart (the "Vehicle") within the City. I hereby agree to assume the full risk of any damage or injury to person or property which may be sustained as a result of the operation of the Vehicle and to indemnify, defend and hold harmless the City for any and all costs, losses, expenses or damages incurred by the City (including attorney's fees and costs) as a result of the operation of the Vehicle. I hereby waive and relinquish all claims which I now have or may subsequently have as a result of the operation of the Vehicle, and fully release and discharge the City and its officers, employees, agents, members and servants, from any claims that may arise from the operation of the Vehicle.

I have received, read and understand the "Golf Cart Ordinance." I have paid the permit fee for the above golf cart. I also understand that the City of Chillicothe Police Department and/or City of Chillicothe interpretation of all the rules and regulations are final. I will insure that any assigned proof of compliance will remain attached to the golf cart at all times. I furthermore insure that I will obey all the rules and regulations set forth by the City of Chillicothe concerning the operation of a golf cart with the City limits.

Signature of Applicant

~~~~~~~~~~~~~~~~~~~~~~OFFICIAL USE ONLY~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
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Inspected by: \_\_\_\_\_

Date Inspected: