

**APPLICATION FOR GOLF CART
REGISTRATION AND CITY TAG**

The undersigned applies for GOLF CART Tag and states:

Name: _____

Address: _____

Attica, IN 47918

Telephone Number: (765)-_____

Make and model of Golf Cart:

Driver's License No.: _____

Insurance Company: _____

Policy Number: _____

I certify that I have received a copy of the City Ordinance regarding Regulations of Golf Carts, have read that Ordinance and agree to be bound by Its Rules and Regulations.

Date: _____

Signature: _____

For City Use:

Received the sum of \$25.00 City Tag No. _____ issued to the Applicant on

By: _____

