OFF-ROAD UTILITY VEHICLES, GOLF CARTS, MOTORIZED WHEELCHAIRS APPLICATION / PERMIT
City of Stewartsville

The following Special Use Permit is requested by:

_____ of _____
(Full Name-Owner of Vehicle – Must be person applying) **(Address)**

Phone Number_____ **Driver's License #** _____

Type of Vehicle_____ **Vehicle ID Number**_____

REQUIREMENTS TO OPERATE OFF-ROAD UTILITY VEHICLE, GOLF CART OR MOTORIZED WHEELCHAIR IN THE CITY:

1.) Operator must carry a special permit issued by this city, and
2.) Operation of UTV, Golf Carts, and Motorized Wheelchairs only for use between the official sunrise and sunset on the day of operation, and
3.) Off-road Utility Vehicles, Golf Carts, and Motorized Wheelchairs are prohibited in city streams and City Park, and
4.) License, flag and slow moving vehicle sign are required (see Section 340.330.C), and
5.) No careless driving, and
6.) No driving under the influence of alcohol or controlled substance, and
7.) Helmet required if under eighteen years of age on UTV's, and
8.) Insurance required (A copy of your liability insurance must be with vehicle if in operation), and
9.) Passengers are prohibited unless agricultural use or if seat is designed to carry more than one person.

I understand that this permit is being issued only for the calendar year as indicated by the date below. This permit must be renewed by January 1st of each year. I also understand that the use of the off-road utility vehicle, golf cart, or motorized wheel-chair is governed by City Code 340.310 thru 340.330 and for the specific use as indicated above. The City Code on off-road utility vehicles, golf carts, and motorized wheelchairs is on the back of this permit application in its entirety. Violations of this Code may result in fines and/or the loss of the Permit. This signed document must accompany the off-road utility vehicle, golf cart or motorized wheelchair at all times when in use.

_____ _____ _____
Signature of Applicant **Print Name** **Date**

TO BE FILLED OUT BY CITY

Upon the Chief of Police's signature, applicant is permitted to use the off-road utility vehicle, golf cart or motorized wheelchair as requested above. Please carry a copy of this paper on the vehicle at all times.

***$15.00 fee collected by:** _____ _____
City Clerk **Date**

_____ _____ **Date to Renew:**
Chief of Police Signature as Approval **Date Valid** **January 1,** _____

CITY LICENSE PERMIT # _____

** No fee for handicapped*