



Golf Cart License Application

Submit in Person to: Police Department at 11955 Champlin Drive

To obtain a permit, the following information is required:

- License Application
- Make, model, year, and vehicle identification number of the golf cart
- Proof of current insurance for the motorized golf cart
- Current driver's license
- Annual Fee: \$100

APPLICANT INFORMATION

Applicant's Full Legal Name (Must be Owner):

Applicant's E-Mail:	Applicant's Phone Number:		
Applicant's Permanent Address:	City:	State:	Zip:
Applicant's Mailing Address (If Different):	City:	State:	Zip:
Applicant's Driver's License Number:	DOB:		

Are you applying as a physically disabled person? Yes No

GOLF CART INFORMATION

Make:	Model:
Serial Number:	Color:

INSURANCE INFORMATION

Company:

Policy Number:	Effective & Expiration Date:
----------------	------------------------------

PERMIT AGREEMENTS, CONDITIONS, & REGULATIONS

I have received, read, and understand the City of Champlin ordinance pertaining to the operation of golf carts on local streets. I have also received and understand the map titled "Roadways for Operation of Golf Carts". I agree to operate my golf cart in compliance with city ordinance, the associated map, and/or the Minnesota Statutes. I understand the requirements of my golf cart as stated in the city ordinance and will comply. I understand that this permit is a one-year permit and will need to reapply in the following year if I wish to continue using my golf cart. I understand that violation of city ordinance, associated map, and/or state statutes may be grounds for a fine or revocation of my permit.

Applicant Signature

Date

***Approved permits must be picked up at the Champlin Police Department in person.**

POLICE DEPARTMENT USE ONLY

Applicant must initial the following, stating their golf cart meets the requirements below:

- Slow-moving vehicle emblem
- Rear view mirror
- Parking brakes
- Proof of insurance
- Proof of credible assurance of disability, such as state-issued parking placard or verbal statement, if applicable (if checked yes above)

Date Permit Issued: _____ / _____ / _____

By: _____
City Staff Name

Golf Cart Permit Expiration Date: 10/31/202

Golf Cart Permit Number: _____

***The Permit sticker must be displayed on the rear driver-side bumper and be visible at all times.**