

# City of Moran Golf Cart Permit Application

**Please Print or Type**

Applicant's Full Legal Name: \_\_\_\_\_  
First      Middle      Last

Physical Address: \_\_\_\_\_  
Street      City      State      Zip Code

Mailing Address: \_\_\_\_\_  
Street      City      State      Zip Code

Telephone Number: (\_\_\_\_) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Registered Operators

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**Annual Golf Cart Permits are \$30.00 annually and expire on December 31.**

## REQUIREMENTS

**\* A valid golf cart permit issued by the City of Moran. Golf carts may be operated on City streets only. It is the responsibility of the golf cart owner to know what roads are designated as permissible for the operation of golf carts.**

**\* Applicants must must provide proof of liability insurance when filing this application. Liability insurance must be continuously maintained in your name, for the entire time the vehicle is registered/or should be registered with the City of Moran.**

**\* All golf carts must be equipped with a Slow-Moving Vehicle Emblem Or Placard.**

**Submit this application and fee along with proof of liability insurance to Moran City Hall.**

## INSPECTION CERTIFICATE

Year: \_\_\_\_\_ Make/Model: \_\_\_\_\_ Color: \_\_\_\_\_

Serial Number: \_\_\_\_\_ Tag No: \_\_\_\_\_

**I certify that I have inspected the described golf cart and that it is equipped as required by law.**

Name: \_\_\_\_\_

Agency: Moran Police Department

ID Number: \_\_\_\_\_

Telephone Number: (620) 237-4724

Signature of Inspector: \_\_\_\_\_ Date: \_\_\_\_\_

## CHECK LIST

\_\_\_: Proof of Insurance

\_\_\_: Mirror

\_\_\_: Copy of Owners Driver's License

\_\_\_: Slow-moving vehicle emblem or placard

\_\_\_: List of Registered Operators