

City of Moran

ATV & UTV 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: _____

Signature of Applicant: _____ Date: _____

Annual ATV & UTV Permits are \$30.00 annually and expire on December 31st.

REQUIREMENTS

**** Operator must have a valid driver's license and be 18 years of age or older.***

**** 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.***

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

INSPECTION CERTIFICATE

Year: _____ Make/Model: _____ Color: _____

Serial Number: _____

I certify that I have inspected the described ATV/UTV 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

___: Brake lights

___: Copy of Owners Driver's License

___: Emblem/Flag