

**CITY OF ST. JOHN
APPLICATION FOR REGISTRATION
OF A GOLF CART**

Date: _____

Phone Number: _____

License Number _____
(permit number – file with the police dept.)

Name of Owner: _____

Owner's Residence Address: _____
(or bona fide place of business)

Brief Description of Vehicle: _____

Make: _____ Model: _____ Serial #: _____

VIN #: _____

Signature of Applicant: _____

(Copy of owner's driver's license required.)

****Proof of Insurance, as required in Section 6 shall be furnished at the time of application for registration.***

Application Completed: _____

Inspection Completed: _____

Proof of Liability Insurance: _____

\$25.00 Fee (Receipt #) _____

Permit Completed: _____

Copy of Ordinance #983 to Customer: _____

Original Permit/Customer: _____

Copy of Permit/City: _____

License # to Police Dept: _____