

City of Durand

Golf Cart Registration

Name: _____

Address: _____

Phone: _____

The following items will be inspected and must pass before registration. These items must also continue to be operable and in place whenever the golf cart is in operation. Your initials on each line signify that the statement is true and that your cart has all of the listed safety equipment.

- _____ Working brakes
- _____ Proof of Insurance (\$100,000 per person, \$300,000 per accident, \$5,000 medical)
- _____ Slow Moving Vehicle sign or red flag on the rear of the cart
- _____ 2- 3" reflectors on the rear of the cart
- _____ Rear View Mirror
- _____ Cart speed cannot exceed 20 mph
- _____ Cart shall only be operated by licensed drivers
- _____ The owner has a copy of the ordinance or has reviewed the ordinance and understands it.

License Number Issued: 2020- _____

This registration will expire on December 31, 2020.

This form along with a \$15 check shall be mailed to the Durand Police Department, 740 7th Ave W, Durand, WI 54736

Owner Signature _____

Officer Signature _____