



# MACKINAW POLICE DEPARTMENT

Michael Kemp, Chief of Police

102 East East Avenue, P.O. Box 877

Mackinaw, Illinois 61755

Phone Dispatch: (309) 346-4141

Office: (309) 359-8914



## GOLF CART/UTILITY TERRAIN VEHICLE (UTV) PERMIT

### REGISTERED OWNER:

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

Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

DOB: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_

### ADDITIONAL OPERATOR:

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

Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

DOB: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_

### GOLF CART/UTV INFORMATION:

Make: \_\_\_\_\_

Model: \_\_\_\_\_

Year: \_\_\_\_\_

Color: \_\_\_\_\_

VIN/Serial Number: \_\_\_\_\_

### INSURANCE INFORMATION:

Insurance Company: \_\_\_\_\_

Effective Date: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

By signing this application, I (registered owner), understand that in order to keep my registration valid, I must keep the minimum liability insurance as required by Illinois Law for vehicles valid and up to date, and that my permit, if issued, is subject to revocation if I am found to not have met this, or any other requirement under Mackinaw Village Ordinances. I also affirm that I have received a copy of Ordinance #985 for my reference.

Signature of Registered Owner: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Inspecting Officer: \_\_\_\_\_

Date: \_\_\_\_\_

Please be sure to bring the entire packet (application, checklist, and copy of Ordinance #985) with you when registering your Golf Cart/UTV. When the permit is issued you will receive a copy of the completed application and checklist from the inspecting officer.