

# Golf Cart & Utility-Terrain Vehicles Permit Application

## Village of Heyworth

108 S. Buchanan Street  
P.O. Box 439  
Heyworth, IL 61745-0439  
P: (309) 473-2811  
F: (309) 473-2291



**REGISTRATION #** \_\_\_\_\_

Owner's Name: \_\_\_\_\_

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

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

Phone #: \_\_\_\_\_

**Principle Operators (up to 4): INCLUDE COPY OF DRIVER'S LICENSE & INSURANCE CARD**

Name: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

Name: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

Name: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

Name: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

Make of Golf Cart or Utility-Terrain Vehicle: \_\_\_\_\_

Model: \_\_\_\_\_ Serial #: \_\_\_\_\_

Color: \_\_\_\_\_ Description of Vehicle: \_\_\_\_\_

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

Insurance Agent: \_\_\_\_\_

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

Phone #: \_\_\_\_\_

\_\_\_\_\_  
Date: \_\_\_\_/\_\_\_\_/20\_\_\_\_

**Signature of Applicant**

**Permit Fee: \$100.00**

**FOR OFFICE USE ONLY:**

**MAKE COPY OF DRIVER'S LICENSE & INSURANCE CARD**

Name of Inspector: \_\_\_\_\_ Date of Inspection: \_\_\_\_\_

Inspected by: \_\_\_\_\_ Effective Date: \_\_\_\_\_

Approved: \_\_\_\_\_ By: \_\_\_\_\_  
(Yes) (No)

**THIS FORM MUST BE KEPT IN THE VEHICLE AT ALL TIMES**