

Town of Hollywood Park Golf Cart Permit Application



Permit Number: _____

Date of Application:Applicant Name: Last:		Expiration Date:			
		First:	Mid	Middle Initial:	
Stre	eet	City	State	Zip	
Applicant Phone Number: (Ho	ome):	(Cell):	(Work):		
Date of Birth:	Driver's License #:		State:		
E-mail Address:					
Address if golf cart is stored at	a different locati	on: (than above):			
Address:					
	Street	City	State Zi	ip	
	Golf	Cart Informati	on		
Vehicle Identification Number	and/or Serial Nu	mber:			
Year: Make	e:	Model:	Color:		
Electric or Gas:	Identifyin	g Features (if applicable):			
	Do Not Wri	te Below Line – Office	Use Only		
Required Inspection Items:					
☐ Headlamps (two required	l) Tail lamps	(two required) Slow-Mov	ring Emblem Parking	Brake	
☐ Side Reflectors – each side	de (2 front – amb	er color / 2 rear – red color)	Horn (capable of being	heard at 200 feet)	
Rear View Mirror (unobs	structed view to 2	00 feet)	(gas)		
Notes:					
Pass Inspected F	By:				
Fail Date:					
Fee: Initial Inspection \$50.00	If Golf Cart does	NOT pass inspection there will	be an additional \$10.00 fee	for re-inspection	
Pass Re-Inspecto	ed By:				
Fail Re-Inspect	ion Date:				