

CITY OF LOWDEN
PO BOX 310, 501 MAIN STREET, LOWDEN, IA. 52255

GOLF CART REGISTRATION

Lowden Permit # _____ Issue Date: _____
(Supplied by City-Affix to Driver's Side Rear of Golf Cart)

\$25.00 PERMIT FEE

NAME: _____

ADDRESS: _____

PHONE: HOME _____ CELL: _____

DATE OF BIRTH: _____

DRIVER'S LICENSE NUMBER: _____

EXPIRATION DATE OF DRIVER'S LICENSE: _____

PROOF OF INSURANCE W/PROVIDER: _____

POLICY #: _____

***I understand this permit is issued to me and will apply only to my golf cart. I understand drivers of the golf cart, other than me, must be at least 16 yrs. of age and possess a valid Iowa driver's license.**

I understand that as the Permit holder, I will be held responsible for any violations or penalties.

***I have read a copy of Ordinance #795, Chapter 10.22, (golf carts) of the City of Lowden Code of Ordinances.**

APPLICANT'S SIGNATURE: _____

APPLICANT'S PRINTED NAME: _____

CITY OFFICIAL INSPECTED/APPROVED BY: _____

CITY CLERK: _____