

GOLF CART REGISTRATION

Town of Beaux Arts Village, Washington



LAST NAME: _____ FIRST NAME: _____ MI: _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

GOLF CART YEAR: _____ MAKE/MODEL: _____

SERIAL: _____

ANNUAL REGISTRATION FEE (must be paid in January of each calendar year): \$30.00

My initials and signature below verify that I:

- Have received and reviewed Chapter 10.15 of the Beaux Arts Village municipal code governing golf cart operations and restrictions. _____ initials
- Relieve Beaux Arts Village of all liability regarding my golf cart and its operation. _____ initials
- Understand that Beaux Arts Village is neither inspecting my golf cart nor guaranteeing its condition or safety. But understand that my golf cart must be equipped with headlight, tail-lights, seatbelts, and rearview mirrors. _____ initials
- Understand that I and/or anyone who drives my registered golf cart must have valid Washington State Drivers License and will obey the rules of the road knowing that I or a licensed driver driving my golf cart can be cited for violating said rules. _____ initials
- Understand that I and/or anyone who drives my registered golf cart must have proof of insurance when operating my registered cart. _____ initials
- Must renew my annual registration and pay the registration fee every January. _____ initials

My signature indicates that I have given the proper information in regards to my golf cart that I own. By signing below verifies that I understand all that is required all that is required to operate my golf cart.

Signature: _____ Date: ___/___/___

TOWN USE ONLY:

ASSIGNED CART IDENTIFICATION NUMBER: BAV Date: ___/___/___