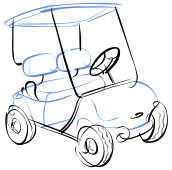


City of



Melbourne

City of Melbourne Golf Cart Registration

Name: (Last) _____

(First) _____

Address: _____ P O Box _____

Phone: (Home) _____ (Cell) _____

Date of Birth: _____

DL# _____

DL Exp. Date: _____

Proof of Insurance with Provider: _____

Policy Number: _____

Names of regular licensed drivers of the golf cart:

I understand this flag is issued to me for a period of one year and is to be clearly displayed on rear of Golf Cart above the roof line or a minimum of 5 feet from the ground. I understand only licensed drivers can operate the Golf Cart. I have received a copy of Ordinance 77, Adopted by the City of Melbourne, Iowa, April, 2016.

Signature: _____

Print: _____

Approved by: _____

City of Melbourne

Fee: \$20.00 _____