**CONYERS POLICE DEPARTMENT**

**Golf Cart Inspection Sheet**

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|  | **VEHICLE INFORMATION** |  |  |
| **YEAR** |  | **SERIAL NO.** |  |
| **MAKE** |  | **GAS / ELECTRIC** |  |
| **MODEL** |  | **INSPECTION DATE** |  |
| **COLOR** |  |  |  |
| **GCIC** | | **[ ] CLEAR [ ] LOCATE** | |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **PASS** | **FAIL** |  | **PASS** | **FAIL** |  | **PASS** | **FAIL** |
| **Brakes** |  |  | **Turn Signal** |  |  | **\*\*Exhaust** |  |  |
| **Parking Brake** |  |  | **Mirror** |  |  | **Headlights** |  |  |
| **Power Switch** |  |  | **Warning Labels** |  |  |  |  |  |
| **Reflectors** |  |  | **Hip Restraints** |  |  |  |  |  |
| **Tail Lamps** |  |  | **Hand Holds** |  |  |  |  |  |
| **Horn** |  |  | **\*Amber Strobe** |  |  |  |  |  |
| \*Amber strobe must be visible for a minimum of 500 feet.  \*\*Exhaust system must be secured and in good working order (applies only if gas powered) | | | | | | | | |

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|  | **REGISTERED OWNER INFORMATION** |  |  |
| **LAST NAME, FIRST, MIDDLE**  **BUSINESS/ORGANIZATION NAME** |  | **STREET ADDRESS**  **CITY, STATE, ZIP** |  |
| **NAME OF PERSON**  **APPLYING** |  | **RACE/SEX** |  |
| **DOB** |  | **PHONE NO.** |  |
| **OLN** |  | **REGISTERED**  **OWNER** | **[ ] YES [ ] NO [ ] UNKNOWN [ ] N/A** |

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|  | **OFFICE USE ONLY** |  |  |
| **APPLICATION FEE** |  | **APPROVED / DENIED** |  |
| **PERMIT #** |  | **EXPIRES** |  |
|  |  |  |  |

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|  | **IMPOUNDING OFFICER INFORMATION** |  | **POLICE ACTION INFORMATION** |
| **OFFICER**  **(PRINT)** |  | **CAD NO.** |  |
| **BADGE NO.** |  |  |  |
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| Upon the issuance of the golf cart permit decal, it is understood that the permit decal must be affixed to the motorized cart or low-speed motorized vehicle and that said permit is valid until 11:59PM, June 30 of the decal year. (DECAL MUST BE WITH CART WHILE OPERATING ON ROAD WAYS).  APPLICANT SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |