

CITY OF MARION

APPLICATION FOR  
GOLF CART PERMIT

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I. NAME & ADDRESS OF APPLICANT

OWNER NAME \_\_\_\_\_

DL# \_\_\_\_\_

ADDRESS \_\_\_\_\_

DAYTIME TELEPHONE \_\_\_\_\_

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II. INSPECTION

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Signature of Inspection by Sherriff's Department

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**\* NOTE: APPROVAL OF GOLF CART PERMIT BY THE CITY OF MARION GRANTS PERMISSION TO DRIVE A GOLF CART ACCORDING TO CITY ORDINANCES AT SPECIFIED LOCATIONS. APPLICANT IS SUBJECT TO APPLICABLE STATE LAWS**

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Signature of Applicant

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**FOR OFFICE USE ONLY**

DATE GOLF CART PERMIT ISSUED \_\_\_\_\_

GOLF CART PERMIT NUMBER \_\_\_\_\_

GOLF CART PERMIT FEE \$ \_\_\_\_\_

PROOF OF INSURANCE \_\_\_\_\_