



Town of Pollocksville Golf Cart Registration Application

Please Print or Type:

Type of Registration: New (\$5.00) Renewal (\$5.00)

Owner/Applicant Name: _____
First Middle Init. Last Suffix

Driver's License #: _____ Issuing State: _____

Co-Owner/Applicant Name: _____
First Middle Init. Last Suffix

Driver's License #: _____ Issuing State: _____

Contact Phone Number: _____ Business Home Cell

Secondary Contact Phone Number: _____ Business Home Cell

Mailing Address: _____ City, State, Zip: _____

Physical Address where golf cart is located: _____

In what County is the Golf Cart listed for tax purposes: _____

Email Address: _____

Please provide the following information pertaining to your golf cart. Applications with incomplete or missing information will not be processed. Town of Pollocksville Ordinance mandates the operator must possess proof of liability insurance in an amount not less than required by North Carolina law for motor vehicles operated on a public highway in the State of North Carolina. You will be required to furnish a copy of your insurance policy as proof of compliance prior to receiving your registration.

Golf Cart Serial #: _____ Make: _____

Year: _____ Color (list all colors): _____

Insurance Company: _____ Phone #: _____

Policy Number: _____ Agent: _____

Initial

I certify under penalty of perjury that this vehicle is insured with the company listed above and that I will maintain the required liability insurance throughout the registration period. I further understand that I am required to notify the town of any changes in insurance carriers.

Initial

I acknowledge that registration of my golf cart with the Town of Pollocksville is a privilege that may be revoked at any time for violations of the rules and regulations in accordance with Town of Pollocksville Ordinance.

Initial

I acknowledge that I am responsible for all operators/passengers of my golf cart, whether I am present or not and that it is my responsibility to ensure that any operators/passengers of my golf cart understand the rules and regulations governing its operation.

Initial

I acknowledge that any violation committed by an operator/passenger of my golf cart will be considered a violation against my golf cart privileges for the purposes of determining my ability to register/renew this registration and for consideration in the revocation of my privileges by the town.

To pass inspection, a golf cart must be equipped with ALL of the following equipment which must be in working order. If one or more items fail, the golf cart shall not be operated, registered or issued a registration plate/renewal sticker until the failed item(s) have been repaired by a qualified technician and the golf cart receives a mark of "Pass" on ALL items listed.

PASS FAIL INSPECTION ITEM

<input type="checkbox"/>	<input type="checkbox"/>	Two operating front headlights visible from a distance of at least 500 feet
<input type="checkbox"/>	<input type="checkbox"/>	Two operating tail lights visible from a distance of at least 500 feet
<input type="checkbox"/>	<input type="checkbox"/>	Two operating brake lights visible from a distance of at least 500 feet
<input type="checkbox"/>	<input type="checkbox"/>	Four operating turn signals (if equipped)
<input type="checkbox"/>	<input type="checkbox"/>	Rear vision mirror
<input type="checkbox"/>	<input type="checkbox"/>	Reflectors (at least one on driver's side and one on passenger's side)
<input type="checkbox"/>	<input type="checkbox"/>	Parking brake functional (if equipped)
<input type="checkbox"/>	<input type="checkbox"/>	Seat belts functioning (if equipped)

I certify that I have conducted an inspection of the above-referenced golf cart and that the conditions of the Inspection Items are accurately reported.

Print Name of Inspecting Officer

Inspecting Officer Signature

Inspection Date

Print Name of Re-Inspecting Officer

Re-Inspecting Officer Signature

Inspection Date

Town Initials: Insurance current _____

Insurance attached _____

Payment logged _____