

Village of Warren UTV / Golf Cart Registration Application

Owner Name: _____ DOB: _____

Address: _____ City: _____ State: _____

Zip Code: _____ Phone Number: _____

Copy of Driver's License Yes / No (Attach to Application)

Make of Vehicle: _____ Model: _____

Serial / VIN #: _____

Year: _____ Color(s): _____

Headlights: Y / N Taillights: Y / N Brake Lights: Y / N

Turn Signals Front: Y / N Turn Signal Rear: Y / N

Rearview Mirror: Y / N Seatbelts: Y / N

Factory Exhaust: Y / N Red Reflectors Front / Rear: Y / N

Slow Moving Vehicle Emblem Rear: Y / N

Name of Insurance Carrier: _____ Policy #: _____

Copy of Insurance Card with Application: Y / N

*If "NO" was answered in **ANY** of the above questions a permit **WILL NOT** be issued until that issue is resolved.

Misc. Info: _____

I _____ understand the Rules and Regulations set forth by the Village of Warren and The Village Board. The Village assumes **NO** liability for permitting the use of UTV's and Golf Carts.

Signature: _____ Date: _____

Permit Issued by: _____ Permit #: _____