

GOLF CART INSPECTION FORM



Name: _____

Address: _____

Telephone: _____

Golf Cart Manufacturer: _____ Serial or ID #: _____

I have received a copy of the City of Greenfield's Golf Cart Ordinance 2017-19 which includes the rules and regulations related to operation and required equipment of a golf cart. I agree to pay any violation fines associated with the inspection, as listed in 71.64 Penalties section of the Ordinance.

Signature

Date

| Required Equipment / Documentation | YES | Operable | NO |
|--|-----|----------|----|
| Headlights | | | |
| Tail Lights | | | |
| Turn Signals | | | |
| Rear View Mirror | | | |
| Proof of Insurance (agency and policy #) | | | |
| Valid Driver's License/ ID Card | | | |
| Slow Moving Vehicle (triangle) | | | |

City of Greenfield Police Officer's Name and ID #:

Date

Officer's Signature

| OFFICE USE ONLY | |
|--------------------------------------|---|
| Date: _____ | Tag #: _____ |
| Amount Paid: _____ | Expires # _____ |
| Method of Payment (Check One): | Receipt # _____ |
| <input type="checkbox"/> Money Order | <input type="checkbox"/> Check Check #: _____ |

Please return form to the Greenfield Police Department, 116 South State Street, Greenfield, IN 46140
Or call (317) 325-1205 with any questions.