



WASHINGTON

301 C Street, P.O. Box 296, Washington, KS 66968

SPECIAL PURPOSE VEHICLE REGISTRATION FORM (ATV/golf cart/work-site utility truck/micro utility truck)

Name: _____ Date: _____

Residence Address (or place of business): _____

ATV Golf Cart Work-Site Utility Vehicle Micro-Utility Truck

Make of vehicle: _____ Color: _____

Model: _____ Serial Number: _____

Insurance Company (attach copy): _____

ATV, golf cart, micro-utility truck, and work site utility vehicles may not be operated on city streets without registration.

Proof of insurance must be presented to the city clerk at the time of registration.

\$20.00 registration fee required at the time of registration.

Registrations expire December 31st each year, and are NOT transferrable.

I _____, acknowledge that I have received a copy of the City of Washington Municipal Code Chapter 15 Article 2 Sections 15-206 through 15-214 inclusive. I understand that if I wish to operate this vehicle on City streets I am required to renew this permit annually, which requires proof of insurance.

Applicant Signature: _____

Permit #: _____ Date Issued: _____

Approved by: _____