



City of Solon, Iowa Annual Golf Cart Registration Form

Owner Information

Name: _____

Address: _____

Phone #: _____

Applicant Information (if different from owner listed above)

Name: _____

Address: _____

Phone #: _____

Cart Information

Year _____ Make _____ Power (check one): Gas Electric

Number of wheels: _____ Number of Passenger seats: _____

Serial Number: _____ Color: _____

Location Cart Stored (if different from owner's residence listed above)

It is the responsibility of the cart owner to maintain liability insurance for operation of the cart on city streets and to be able to prove such liability is in force at all times. A copy of proof of insurance must also be attached to this application.

Attached? Yes No

Operation of golf carts is allowed only by persons over the age of 18, possessing a valid driver's license. A copy of applicant's driver's license must be attached to this application.

Attached? Yes No

By signing this application I agree that I have received a copy of Ordinance #427 and Iowa Code Section 321.247. I also understand that it is my responsibility to comply with all rules and regulations regarding the operation of Golf Carts upon City streets as set by the City of Solon and the State of Iowa.

Signature: _____ Date: _____

Registration Fee (\$30.00) Registration #: _____

Permit issued by: _____

Golf Carts may be operated only between sunrise and sunset.