

CITY OF GASSVILLE
GOLF CART USE PERMIT

(PLEASE PRINT)

OWNERS NAME: _____

ADDRESS: _____

PHONE: _____ CELL/ALT. PHONE: _____

THIS PERMIT SHALL BE GOOD FOR A PERIOD OF (1) YEAR FROM THE DATE OF ISSUANCE AND THE (DECAL) PROVIDED SHALL BE PLACED ON THE DRIVERS SIDE OF THE GOLF CART. BY THE SIGNATURE BELOW, THE APPLICANT HAS PAID THE REQUIRED FEE OF \$25.00 AND PROVIDED A VALID DRIVERS LICENSE (PHOTOCOPY ATTACHED).

OWNERS SIGNATURE: _____ DATE ISSUED: _____

COG OFFICE USE ONLY:

PERMIT NO: _____

ISSUED BY: _____

DATE: _____