## **CITY OF LEOTI**

Council Meeting 1<sup>st</sup> & 3<sup>rd</sup> Monday – 6:30 P.M.

## GOLF CART/RECREATIONAL OFF-HIGHWAY VEHICLE REGISTRATION PERMIT APPLICATION

Date:	New Permit:	Permit Renewal:	_
Applicant Name:		Phone #	
Applicant Address:	Mailin	g Address:	
Applicant Driver's License:		Driver's License State:	
Make/Model	<u>Serial Number</u>	City License #	<u>Fee</u>
_	<u>-</u>	(Recorded by City Staff)	\$40.00
Instructions:			
City of Leoti - Attr 406 S. 4 <sup>th</sup> St. PO Box 7E Leoti, KS 67861 For addition	c: City Clerk  chal information, contact the  CLF CART AND RECRE	or mail the completed form t City Clerk at (620) 375-2341 ATIONAL OFF-HIGHWA OF EACH CALENDAR YE	AY VEHICLE
I received and read the City of that if I wish to operate this m permit annually, which require adequate insurance and follow	Leoti Golf Cart and Recreati ode of transportation on Cit es proof of insurance. By sig	onal Vehicle Ordinance 2016 y streets that I am required to ning this application, I agree	-09. I understand o renew this
Signature of Applicant:			
	CITY USE ONI	_Y	
Liability Insurance	Photo	Date Received	
City Clerk or Denuty City Clerk	Signature to Annrove:		

Office: (620) 375-2341
Fax: (620) 375-2416
E-mail: cityofleoti@wbsnet.org
Website: www.leotikansas.org