



MT. WASHINGTON POLICE DEPARTMENT **GOLF CART INSPECTION**

APPLICANT INFORMATION:

OWNER OF CART:

ADDRESS:

DRIVER'S LICENSE #:

DATE OF INSPECTION:

GOLF CART INFORMATION:

CART MAKE:

CART YEAR:

CART COLOR:

CART VIN#:

Engine Propulsion: Gas Electric

REQUIRED SAFETY EQUIPMENT:

HEAD LAMPS (2)

TAIL LAMPS (2)

SLOW MOVING VEHICLE EMBLEM

SIDE REFLECTORS- EACH SIDE (FRONT AMBER/REAR RED)

STOP LAMPS (BRAKE LIGHTS)

DRIVER SIDE MIRROR

PASSENGER MIRROR OR CENTER MIRROR

PARKING BRAKE

TYPE 1 or 2 SEAT BELT ASSEMBLY AT EACH SEATING POSITION

WINDSHIELD

PROOF OF INSURANCE



MT. WASHINGTON POLICE DEPARTMENT
GOLF CART INSPECTION

I _____ have been provided with a copy of the City of Mt. Washington golf cart ordinance. The Mt. Washington Police Department has gone over the ordinance with me, and have answered all question I may have in regards to the ordinance.

Signature of cart owner: _____

Date:

Inspecting Officer:

Date: