



For Office Use Only
Fee (\$25.00) Paid
Receipt # _____

ATV/UTV/GOLF CART Application Form

Qualifications for application:

- You have registered your ATV/UTV unit with the state of Wisconsin
- You and your ATV/UTV/Golf Cart meet all inspection requirements (**See attached/back**)
- Your ATV/UTV/Golf Cart unit has not been previously registered with the City of Brillion

If ALL of the above stated criteria is met please complete the following:

OWNER INFORMATION

Owner Name _____ D.O.B. ___/___/___
(First MI. Last)

Address _____ Phone Number _____
(Street, City, State, Zip)

Co-Owner Name _____ D.O.B. ___/___/___
(First MI. Last)

Address _____ Phone Number _____
(If different from above)

ATV/UTV/ GOLF CART INFORMATION

Type (Check one): ATV UTV Golf Cart Engine Type: Gas Electric Other

Serial/VIN# _____ State Registration # _____ Exp. Date _____

Year _____ Make _____ Model _____ Color _____ Engine Size _____

Insurance Provider(Required) _____ Insurance Expiration Date _____

I, the above mentioned owner or co-owner, certify that I will follow all requirements for operating an ATV/UTV/Golf Cart within the City Of Brillion. I certify that the ATV/UTV/Golf Cart being presented for a permit is insured and I provided accurate information for the application form. I further state that my regular driver's license has not been Suspended, Revoked, or Cancelled for any reason in any state. Furthermore, I understand that by signing below, I promise not to modify my ATV/UTV/Golf Cart in any way that would violate any part of the ATV/UTV/Golf Cart ordinance. I also understand that if I do violate any part of the aforementioned ordinance governing ATV/UTV/Golf Cart operation, my privilege to operate an ATV/UTV/Golf Cart in the City Of Brillion may be revoked along with other penalties, disallowing me from further operation of an ATV/UTV/Golf Cart within the city of Brillion.

By signing below I state that I agree to the above mentioned statement and attest that all the above information is true and correct to the best of my knowledge.

Owner Signature _____ Date ___/___/___

Witness Signature _____ Date ___/___/___