



**CITY OF PINE ISLAND**  
 250 South Main Street – PO Box 280  
 Pine Island, MN 55963  
[www.pineislandmn.com](http://www.pineislandmn.com)  
 Phone: (507)356-4591  
 Fax: (507)356-8230

**GOLF CART PERMIT APPLICATION**

Golf Cart Permit Information can be found in [city code Sec. 8.08](#)

<b>CHECKLIST OF MATERIALS REQUIRED FOR GOLF CART PERMIT</b>	
1.	Application Completed
2.	\$10 Application fee

**FILL IN ALL BLANKS. WRITE N/A IF A QUESTION DOES NOT APPLY**

**STEP 1. APPLICANT AND VEHICLE INFORMATION**

1. First Name		2. Last Name	
3. Primary Telephone Number	4. Type of Phone: <input type="checkbox"/> Cell <input type="checkbox"/> Business <input type="checkbox"/> Home <input type="checkbox"/> Other	5. Email Address	
6. Address			
7. Mailing Address (if different than above)			
8. Please send official notices relating to this application to:  <input type="checkbox"/> Mailing Address <input type="checkbox"/> Email			
9. Golf Cart:  Make: _____ Model: _____ Year: _____ Serial Number: _____			

**STEP 2. LICENSE AND INSURANCE INFORMATION**

1. Driver's License (attach a copy of driver's license to the application): License Number: _____ State: _____
2. Insurance (attach a copy of Insurance policy/card to the application) Company name: _____ Policy Number: _____



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**STEP 3. REVIEW AND VERIFICATION**

The information collected and required as part of this application will be used to determine eligibility for a City of Pine Island License or Permit. Disclosure of this information is voluntary. It is not legally required to provide requested data, however, failure to do so may mean the City of Pine Island is unable to process this application. All information contained in this application is public information upon submission pursuant to the Government Data Practices Act, Minnesota Statutes Chapter 13. Individuals have the right to see and obtain copies of the data maintained on them, including private data, and also have the right to be told the contents and meaning of the data, and to contest the accuracy and completeness of the data.

**A SIGNATURE VERIFYING THE OVERALL ACCURACY AND COMPLETENESS OF THIS APPLICATION BY THE OWNER, PARTNER, OR OFFICER IS REQUIRED IN ORDER TO PROCESS THIS APPLICATION**

**I, (print name) \_\_\_\_\_, agree I will strictly comply with all the laws of the State of Minnesota and all ordinances of the City of Pine Island, and understand I can review all City ordinances on the City website or in the City Clerk’s Office. I hereby certify that I have read and understand every question in this application and that the answer to every question is true to my knowledge, information and belief. I further understand that the giving of false information as part of this application, regardless of when it is discovered, and/or failure to give required pertinent information can constitute cause for denial.**

**This application to the best of my knowledge meets the requirements set forth in City Code, Chapter 8, Sec. 8.08**

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

**PERMIT CONDITION**

**Operator Permit Display** - All operator permits shall be issued for a specific motorized golf cart. A current city-issued operator permit tag shall be plainly visible from the front of the motorized golf cart.

1. I agree to operate only on designated routes from sunrise to sunset. I shall not operate in inclement weather or when visibility is impaired by weather, smoke, fog, or other conditions or at any time wherein there is insufficient light to clearly see persons and vehicles on the street or roadway at a distance of 500 feet.
2. I will display a slow-moving vehicle emblem and a safety warning flag above normal height of above surrounding vehicles; my golf cart will be equipped with front and rear light per state statutes and as approved by the city my golf cart will be equipped with a rear-view mirror.
3. I will understand that I have all the same rights, duties, and responsibilities as any other vehicle operated on city streets and will abide by all state and local statutes, and I understand that I can be charged or fined for violation of these statutes.



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|---|
| 4. I understand that my permit can be revoked by the city if I have operated the golf cart in an unsafe manner.   |
| 5. I understand that the city assumed no liability for any injuries to persons or property which may result from my operation of a motorized golf cart. |
| 6. I understand that I must provide the city with a copy of the following: current driver's license and proof of insurance.                             |

<b>FOR CITY STAFF USE ONLY</b>	
1. Is the application filled out in its entirety? <input type="checkbox"/> Yes <input type="checkbox"/> No (What is needed to complete the application?)	
2. Received by:	3. Date Received:
4. \$10 Fee Paid:	
5. Approved or Denied: (reason for denial):	
6. Applicant notified (date, method, staff member):	