

SENOIA POLICE DEPARTMENT

505 HOWARD ROAD

SENOIA, GEORGIA 30276

PHONE: 770-599-3256

FAX: 770-599-8329

MOTORIZED CART

RESIDENTIAL REGISTRATION

**For Office Use ONLY:**

DECAL NO: \_\_\_\_\_\_\_\_\_\_

**CART INFORMATION:**

VIN/Serial No \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(include all letters and numbers)

Make \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Model \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Year \_\_\_\_\_\_\_\_\_ Color \_\_\_\_\_\_\_\_\_\_ Type: GAS / ELECTRIC (circle one)

**OWNER INFORMATION:**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Are you 18 years of age or older? YES / NO (circle one)

Physical Address of Owner & Cart

Street Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Subdivision \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PLEASE READ CAREFULLY:**

***I have received a copy of the City of Senoia’s “Golf Cart Operation Regulations, Liability, and Penalties.” I understand and will abide by the City of Senoia and State of Georgia laws pertaining to motorized carts. I understand that, as the registered cart owner, I accept both legal and civil responsibility for any actions committed during the operation and use of the cart and understand that I will be charged for any violation under Section 66-109. I certify that the information contained herein is correct and accurate to the best of my knowledge.***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Owner’s Signature (required) Date