



16 West Church Street
Bowling Green, MO 63334
573-324-5451 Phone
573-324-2644 Fax
www.bowlinggreen-mo.gov

RECREATIONAL VEHICLE PERMIT APPLICATION

Applicant (Registered Owner): _____

Home Address: _____

Phone: _____

UTV:

Make: _____ Model: _____

Vehicle Identification Number: _____

GOLF CART:

Make: _____ Model: _____

Vehicle Identification Number: _____

PROOF OF LIABILITY INSURANCE:

Insurance Company: _____

Policy #: _____ Policy Period: From _____ To _____

Agency/Agent Name: _____ Phone: _____

Signature: _____ Date: _____

Permit Authorization (Office Use Only)

Golf Carts Only: Safety Flag Attached _____ Operable Horn _____ Seat Belts _____

Approved: YES _____ NO _____ (if no, list reason(s) for denial): _____

Approved By: _____ Date: _____

Permit #: _____ CODE 560 Permit Fee: \$30.00 _____ Renewal: \$15.00 _____