

With Time For You

Since 1879



City of Richmond

36725 Division Road · P.O. Box 457 · Richmond, Michigan 48062-0457

Office: (586) 727-7571 · Fax: (586) 727-2489

Golf Cart Registration Application

Applicant _____

Address _____

City _____ State _____ Zip _____

Telephone _____

Email (optional) _____

Driver's License Number(s) _____

Make and Color of Golf Cart _____

Insurance Policy _____

(Please bring copy to the Police Department)

I hereby certify receipt of the Golf Cart Ordinance Packet and have read and understand the Ordinance and Information provided in the packet.

Applicant's Signature _____ Date _____

When registering your golf cart please bring the following to the Richmond Police Department, 36725 Division Road, Richmond, MI 48062:

Completed Application Form

Divers License

Golf Cart on a trailer

Proof of Insurance

Non-City Residents and their host property owner must also fill out and sign page 2 of the application.

Non-Residents - Please complete the information below.

City Resident/ Host Owner Authorization
--

City Resident/Host Property Owner_____

Address_____

City_____ State_____ Zip_____

Phone_____

Email_____

I acknowledge and understand that the applicant for this Golf Cart Registration will be utilizing my property located at _____ in the City of Richmond from which to operate their golf cart and/or store their golf cart trailer. Trailers utilized to transport the golf cart shall be stored on my property and will not be parked on the public street.

City Resident/Host Signature _____ Date_____

Golf Cart Owner's Signature _____ Date _____