



TOWN OF EAST BEND

"Rich in History"

108 West Main Street
East Bend, North Carolina 27018
Phone 336-699-8560 • Fax 336-699-4335

Annual Golf Cart Registration Form

Name (Full): _____ Phone: _____

Date of Birth: _____ Driver's License Number/State: _____

Street Address: _____

City/State/Zip: _____

Cart Make: _____ Model: _____

Insurance Company: _____ Policy #: _____ VIN# _____

- I have read and will comply with the Town of East Bend's Golf Cart Ordinance & received a copy. _____ (Initial)
- I understand that I can only drive the cart on streets with a speed limit of 35 mph or less and have received a copy of the Town of East Bend map (designating streets & crossings) _____ (Initial)
- I understand I cannot operate a golf cart at night. _____ (Initial)
- Operator shall hold the Town of East Bend harmless for any and all civil liability associated with said registration and that the permit holder and user waive any and all rights to sue and allow subrogation by insurance company. _____ (Initial)
- I understand that nobody under the age of 16 can operate a golf cart on the road(s) in the Town of East Bend and that the operator must have a valid driver's license. _____ (Initial)

Vehicle Inspection-Checklist-all items are present and operational.

Slow Vehicle Emblem (Triangle): _____ Tires in good condition: _____

Reflector/Reflective Tape on Front and Sides: _____ Height 18" or lower: _____

Working Brakes: _____ Proof of Insurance: _____

Working Parking Break _____ Adequate Steering: _____

Rear View Mirror: _____ No leaking fluid/Loud Exhaust: _____

I certify that my answers to the questions on this application are true and correct to the best of my knowledge. I further understand that by falsifying or failing to provide information, my application will automatically be denied approval.

Signature: _____ Date: _____

Town Official: _____ Fee Paid: _____ Permit No. _____