

CITY OF PLAINVIEW ATV OR GOLF CART PERMIT

Type of Permit: ATV Golf Cart

Full Name:	D.O.B	
Address:		
		Zip:
Phone #:		
DI M		years of age or older)
Year: Make	: N	Model:
Frame Number (VIN	J):	
Insurance Company:		
Policy Number:		
		digits):
THIS SECTION TO	BE FILLED OUT	BY POLICE DEPARTMENT
Officer/Badge Completing	g Registration:	
Tag Number:	Today's Date	÷
Expiration (Circle): 20	23 2024 2025 20	26
		Aug Sep Oct Nov Dec