



Village of Seneca
340 N. Cash Street
Seneca, IL 61360

APPLICATION FOR GOLF CART LICENSE

1. Name of Applicant: _____
2. Address of Applicant: _____
3. Phone Number of Applicant: _____
4. Is the Applicant the owner of this golf cart? ___yes ___no (check one)
5. Date of birth of the Applicant: _____
6. (a) Does the applicant have a valid Illinois driver's license? ___yes ___no
(b) Driver's License Number: _____
6. (a) Does applicant have liability insurance on the golf cart? ___yes ___no
(b) Name, address and phone of insurance company:

Applicant is to include with the application a check in the amount of \$50.00 made to the Village of Seneca as the *yearly* license fee; in addition, a photocopy of your insurance card as well.

Dated this ____ day of _____, 20__

Signature of applicant