

NAME:

2025 Golf Cart & ATV Permit

MAILING ADDRESS:	
PHONE NUMBER:	
EMAIL:	
YEAR & COLOR:	
MAKE & MODEL:	
SERIAL #:	
INSURANCE COMPANY:	
POLICY NUMBER:	
\$20 Per Permit Issued	
One permit required for	each vehicle.
Please complete the form and a check payable to the 'City we will issue you a peri	
City of Halloc PO Box 336 Hallock, MN 56	
Please call the City Office with any q	uestions, 218-843-2737.
We cannot accept payment included with utility payments.	
I certify that all of the information on this application is correct. As is current and in full force. I understand that the City may susper violated any of the provisions of City Ordinance Code 8.21, entitle All-Terrain Vehicles and Mini Trucks" or Minnesota Statute, Chap have not had my driver's license revoked as the result of criminal	nd or revoke this permit upon a finding that I have ed "Special Vehicles, Motorized Golf Carts, Class 1 ter 169 as it may be amended from time to time. I
Signature	Date