

The Village of Hammond Illinois

PO Box 207

Hammond, IL 61929

Office: 217-262-3431 - Fax: 217-262-3109

E-mail: clerk@hvillage.net

Website: villageofhammond.com

APPLICATION FOR GOLF CART/UTV PERMIT

1.	Name of Applicant:		
2.	Address of Applicant:	Phone#:	
3.	Is the Applicant the owner of the golf cart? _	Yes No (check one)	
4.	Date of Birth of Applicant:		
5. (A) Does the Applicant have a valid Illinois driver's license?Yes No (che (B) Driver's license number:			
	(A) Does the Applicant have liability insurance on the golf cart: Yes No (check one) (B) Name, address, and phone # of insurance company:		
		Serial #:	
	Model:	Description:	
	(C) Policy # Attach a photocopy of your insurance card to the application.		
6.	Applicant, please attach to this application a check for your annual payment in the amount of \$40.00 made to the Village of Hammond, as the permit fee.		
Dated	this day of	, 2025	

Inspection Checklist

Brakes/Brake Lights	
Seat Belts-the maximum occupancy of the golf	
car or UTV shall be equal to the number of safety	
belts or passenger restraints	
Turn Signals on Front and Rear	
Steering Wheel Apparatus	
Tires	
Rearview Mirror	
Slow Moving Vehicle Emblem on Rear	
Headlights that emit a white light visible from a	
distance of 500 feet to the front	
Tail lights that emit a red light visible from at	
least 100 feet from the rear, which must be	
illuminated when in operation	
liability and am fully responsible for the operation of agree that the Village of Hammond, in authorizing endorsing said operation and does not and will nagree TO INDEMNIFY AND HOLD HARMLESS THe liability arising from said operation. I further a interpretation of said Ordinance is final and that I will be a said operation.	ng and providing regulations, is in no way ot assume any liability in said operation. I E VILLAGE OF HAMMOND for any and all ocknowledge and agree that the Village's
Signature of Applicant	Date
Permit # Inspection Date:	\$Fee Paid:
Permit Expires July 31, 2026	