

Golf Cart Safety Inspection

Belle Isle Police Department

1521 Nela Avenue

Belle Isle, FL 32809

Office: 407-240-2473



Applicant's Information	
Golf Cart Owner:	
Physical Address:	
Email Address:	
Phone Number:	
Driver's License Number:	
Additional Authorized Driver(s):	
<p>Permittee acknowledges the following in order to receive this permit: <i>All persons who operate or ride in golf carts on city roads do so at their own risk and peril and must be observant of and attentive to the safety of themselves and others, including their passengers, other motorists, bicyclists and pedestrians. The City of Belle Isle has no liability under theory of law for permitting golf carts to be operated on city roads. Any person who operates a golf cart is responsible for procuring liability insurance as required under the City of Belle Isle Code of Ordinances. Chapter 30 outlines the requirements and conditions for golf cart operation.</i></p> <p>Note: You will be required to schedule for a reinspection before renewal of Golf Cart Decal.</p>	
Sign in front of City Staff:	Date:
City Witness: (Sign and Print)	Date:

BELLE ISLE POLICE DEPARTMENT USE ONLY Check the following items			
Inspection Completed By (print name):		Badge #:	
Date of Inspection:			
General & Daytime Use		Nighttime Use	
<input type="checkbox"/>	Efficient Brakes	<input type="checkbox"/>	Brake Lights
<input type="checkbox"/>	Reliable Steering	<input type="checkbox"/>	Head Lights
<input type="checkbox"/>	Safe Tires	<input type="checkbox"/>	Turn Signals
<input type="checkbox"/>	Horn	<input type="checkbox"/>	
<input type="checkbox"/>	Rearview Mirror	<input type="checkbox"/>	
<input type="checkbox"/>	Windshield	<input type="checkbox"/>	
<input type="checkbox"/>	Red Reflective Tape on Front and Back of Vehicle	<input type="checkbox"/>	
		Circle One: PASS FAIL	
		COMMENTS:	
Golf Cart Decal Number: _____		Payment Amount: _____ Cash Credit Card Check #.	