

City of Slidell Golf Cart Equipment Inspection

Original (white) - City of Slidell
Copy 1 (yellow) - Applicant
Copy 2 (pink) - Inspector

Inspector # _____ Initials _____

Date of Application _____

Owner Name _____

Phone Number _____

Street Address _____

Email Address _____

City, State & Zip Code _____

Cart Year _____

Cart Make/Model _____

Proof of Insurance _____

Company

Policy #

Prior to receiving a City of Slidell golf cart permit sticker, the cart must pass inspection by the City or it's designee. The permit sticker shall be permanently placed in the center of the rear reflective triangle by the inspector.

- | | | |
|--------------------------|--------------------------|---------------------------------|
| Y | N | |
| <input type="checkbox"/> | <input type="checkbox"/> | Seat belts for each passenger |
| Y | N | |
| <input type="checkbox"/> | <input type="checkbox"/> | Brakes, including parking brake |
| Y | N | |
| <input type="checkbox"/> | <input type="checkbox"/> | Fully operational Horn |
| Y | N | |
| <input type="checkbox"/> | <input type="checkbox"/> | Safe tires |
| Y | N | |
| <input type="checkbox"/> | <input type="checkbox"/> | Reliable steering apparatus |
| Y | N | |
| <input type="checkbox"/> | <input type="checkbox"/> | VIN/Serial # _____ |



- | | | |
|-----------------------------|--------------------------|--------------------------|
| | Y | N |
| Rear-view mirror(s) | <input type="checkbox"/> | <input type="checkbox"/> |
| | Y | N |
| Front and Rear turn signals | <input type="checkbox"/> | <input type="checkbox"/> |
| | Y | N |
| Tail lamps | <input type="checkbox"/> | <input type="checkbox"/> |
| | Y | N |
| Brake lamps | <input type="checkbox"/> | <input type="checkbox"/> |
| | Y | N |
| Headlamps | <input type="checkbox"/> | <input type="checkbox"/> |
| | Y | N |
| | <input type="checkbox"/> | <input type="checkbox"/> |

Warning Devices must be Red, ReflectORIZED devices on both the front and rear, including a minimum 12"x12" reflective triangle on the rear

Y	N	Date	Permit # / Expiration Date	Amt. Paid
<input type="checkbox"/>	<input type="checkbox"/>	Equipment Inspection "Passed"		

PLEASE READ CAREFULLY; OWNER SIGNATURE AND DATE REQUIRED BELOW: I have received the City of Slidell's ordinance regulating golf cart use in the City (see City Code Ch. 27, Art. V). I understand and will abide by City law and applicable state law pertaining to golf cart operations. I understand that the golf cart owner and/or operator accepts all legal responsibility for any actions committed during the operation of the cart and may be charged for any violations of applicable law. I certify that the information contained herein is correct to the best of my knowledge.

Owner's Signature (required)

Date