

CITY OF MARSEILLES APPLICATION FOR UTV PERMIT

GENERAL INFORMATION

DATE: _____

PERMIT NO. _____

Applicant's Name: _____, DOB: _____

Applicant's Address: _____

Applicant's Phone: _____ Cell: _____, Email: _____

Applicant's Driver License No. _____, State: _____

INSURANCE INFORMATION

UTV INFORMATION

Insurance Carrier: _____ Year/Make: _____

Policy Number: _____ Model: _____

Insurance Effective Date: _____ Vehicle ID#: _____

Insurance Expiration Date: _____ Color: _____

ANY ADDITIONAL OPERATORS

Name: _____ Name: _____

Address: _____ Address: _____

Phone: _____ Cell: _____ Phone: _____ Cell: _____

DL#: _____ D08: _____ DL#: _____ DOB: _____

I acknowledge that I have applied to the City of Marseilles, Illinois (the "City") for a permit to operate a UTV vehicle (the "Vehicle") within the City. I hereby agree to assume the full risk of any damage or injury to person or property which may be sustained as a result of the operation of the Vehicle and to indemnify, defend and hold harmless the City for any and all costs, losses, expenses or damages incurred by the City (including attorney's fees and costs) as a result of the operation of the Vehicle. I hereby waive and relinquish all claims which I now have or may subsequently have as a result of the operation of the Vehicle, and fully release and discharge the City and its officers, employees, agents, members and servants, from any claims that may arise from the operation of the Vehicle.

I have received, read and understand the "UTV Ordinance." I have paid the permit fee for the above UTV. I also understand that the City of Marseilles Police Department and/or City of Marseilles interpretation of all the rules and regulations are final. I will insure that any assigned proof of compliance will always remain attached to the UTV. I furthermore insure that I will obey all the rules and regulations set forth by the City of Marseilles concerning the operation of a UTV with the City limits.

Signature of Applicant: _____ Date: _____

CITY OF MARSEILLES OFFICIAL USE ONLY

Inspected by: _____ Date Inspected: _____

Approved by: _____ Date Approved: _____