*Village of Mendon*

**PO Box 25, 330 North State Street - Mendon, IL 62351**

**Phone: 217.936.2215 - Fax: 217.936.2225**

**ALTERNATIVE TRANSPORTATION PERMIT**

1. No alternative vehicle shall be operated without obtaining a proper permit from the Village of Mendon. Permits shall be granted beginning January 1 of the current year through December 31st of the current year. The cost of this permit is $35.00. Insurance coverage is to be verified prior to obtaining/renewing permit.

2. Every application for a permit shall be made on a form supplied by the Village of Mendon and shall contain the following information:

 1. Name and address of applicant

 2. Name of liability insurance carrier

 3. Description and serial number of vehicle

 4. Signed waiver of liability by applicant releasing the Village of Mendon from any and all future

 claims resulting from the operation of their vehicle on Village streets

 5. Photo copy of applicable liability coverage card for vehicle.

Alternative Vehicles Addressed: Golf carts: Both electric and gas powered; and all terrain utility vehicles with the following equipment:

 1. Horn

 2. Brakes and brake lights

 3. Turn signals on front and rear

 4. Steering wheel

 5. Rubber tires

 6. Rearview mirror

 7. Headlights that emit 500 feet to front

 8. A taillights that emits at least 100 feet from rear

 9.Approved “Slow Moving Vehicle Emblem on Rear of Vehicle

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**ALTERNATIVE TRANSPORTATION PERMIT FORM**

**Permit #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Applicant: Last \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Middle\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address: Street\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Driver's License #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Vehicle Make/Model:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Serial Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***Instructions:***

1. Complete this application and submit with Completed Inspection Form, Insurance Certificate, and Hold

 Harmless Form

2. Make Check in the amount of $35.00 payable to Village of Mendon

3. Bring this application with accompanying documentation and payment, in person, to the Mendon Village

 Office at 330 North State Street. Mendon, IL 62351

This permit expires December 31, 20\_\_

I have received and read the **Village of Mendon Ordinance 351.16** regarding this Alternative

Transportation Permit. I understand that if I operate this vehicle on Village streets that I am

required to renew this permit annually, which requires an inspection and proof of insurance. By

signing this application, I agree to maintain adequate insurance in accordance with all current

ordinances.

**Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Office Use Only:**

\_\_\_\_\_Inspection Form

\_\_\_\_\_Hold Harmless Form

\_\_\_\_\_Proof of Insurance (Photocopy attached)

\_\_\_\_\_Driver’s License ((Photocopy attached)

**Received by Village Representative:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Payment Received: Circle one Cash or Check (Check #\_\_\_\_\_\_)**