

**CITY OF DESHLER  
ATV/UTILITY VEHICLE APPLICATION**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

DRIVERS LICENSE # \_\_\_\_\_

INSURANCE COMPANY \_\_\_\_\_

POLICY # \_\_\_\_\_

BIRTHDATE \_\_\_\_\_ AGE \_\_\_\_\_

*I (THE OWNER OF THE ATV/UTILITY VEHICLE) WILL MAINTAIN LIABILITY INSURANCE ON THE ABOVE ALL TERRAIN VEHICLE AND WILL OPERATE SUCH VEHICLE AUTHORIZED UNDER THE CITY ORDINANCE NO. 828 AND COMPLY WITH NEBRASKA STATE STATUTES.*

APPLICANT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

*NOTE: REGISTRATION STICKER MUST BE PROMINENTLY DISPLAYED ON REAR OF ATV/UTILITY VEHICLE.*

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**PERMIT CHECKLIST**

MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ CC \_\_\_\_\_

\_\_\_\_\_ WORKING HEADLIGHTS

\_\_\_\_\_ WORKING TAIL LIGHTS & BRAKE LIGHTS

\_\_\_\_\_ FEDERALTY APPROVED FLAG

\_\_\_\_\_ OEM MUFFLER

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\$10.00 ANNUAL LICENSE FEE PAID \_\_\_\_\_

LICENSE NUMBER \_\_\_\_\_ EXPIRES \_\_\_\_\_

COPY OF PROOF OF INSURANCE ATTACHED.

SIGNED \_\_\_\_\_

JULIE A BUESCHER, CITY CLERK