

City of Chrisman

Golf Cart/Utility Safety Inspection Form

Golf Cart/Utility Vehicle Registration # _____

Owner: _____

Phone #: _____

Address: _____

Department: _____

Inspection Item	Pass	Fail	N/A	Comments
Brakes				
Tires				
Rearview Mirror				
Red Reflectorized				
Slow Moving Emblem				
Headlight				
Brake Lights				
Turn Signals				
Horn				
Windshield				
Decal in Front Right Hand Corner				

I certify that I have conducted an inspection of the above referenced vehicle and that the conditions of the inspection items are accurately reported.

Inspector's Printed Name

Inspection Date

Inspector's Signature

Golf carts/utility vehicles shall not be operated if any inspection item fails, until such time as the inspection item has been repaired by a qualified technician.