

**TOWN OF RIVERVIEW  
GOLF CART PERMIT APPLICATION  
2026 - 2028**

Applicant's Name: \_\_\_\_\_

Local Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_

Applicant's Phone Number: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

Applicant's Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_

**GOLF CART INFORMATION**

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_

Vehicle Identification Number / Serial Number: \_\_\_\_\_

Electric or Gas: \_\_\_\_\_

Signature: \_\_\_\_\_ Date of Application: \_\_\_\_\_

By signing this application, you are verifying that all factory safety equipment is operational.

Checks made payable to the Town of Riverview

\*\*\$50.00 Three-year permit if registered in (2026)

\*\*\$35.00 if registered in the second year (2027)

\*\*\$20.00 if registered in the third year (2028)

Collected By: \_\_\_\_\_ Permit Issue Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Receipt #: \_\_\_\_\_

**Registration by mail to**

Town of Riverview  
P.O. Box 220  
Mountain, WI 54149

Include a stamped self-addressed envelope