

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

Decal #: \_\_\_\_\_

**FRIPP ISLAND PATROL**  
225 Tarpon Blvd  
Fripp Island, South Carolina  
**Golf Cart / LSV Registration Form**

**To be filled out by owner:**

Owner's Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Island Phone: \_\_\_\_\_ Off Island Phone: \_\_\_\_\_  
Golf Cart Make: \_\_\_\_\_ Color: \_\_\_\_\_  
Serial #: \_\_\_\_\_ # of Seats: \_\_\_\_\_  
Additional Identifiers: \_\_\_\_\_

**To be filled out by Security:**

**VERIFICATION OF EQUIPMENT**

**Golf Carts**

Rearview Mirror: Yes \_\_\_\_\_ No \_\_\_\_\_  
Headlights: Yes \_\_\_\_\_ No \_\_\_\_\_  
Tail Lights: Yes \_\_\_\_\_ No \_\_\_\_\_  
Brake Lights: Yes \_\_\_\_\_ No \_\_\_\_\_

**LSV**

Head Lights: Yes \_\_\_\_\_ No \_\_\_\_\_  
Break Lights: Yes \_\_\_\_\_ No \_\_\_\_\_  
Tail Lights: Yes \_\_\_\_\_ No \_\_\_\_\_  
Turn Signals: Yes \_\_\_\_\_ No \_\_\_\_\_  
Reflex Reflectors: Yes \_\_\_\_\_ No \_\_\_\_\_  
Parking Brake: Yes \_\_\_\_\_ No \_\_\_\_\_  
Windshield: Yes \_\_\_\_\_ No \_\_\_\_\_  
Rearview Mirror: Yes \_\_\_\_\_ No \_\_\_\_\_  
Seat Belts: Yes \_\_\_\_\_ No \_\_\_\_\_

Inspectors Signature: \_\_\_\_\_

**VERIFICATION OF INSURANCE**

Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_

I declare this vehicle is insured with the above named company and I will maintain liability insurance. I am aware that my insurance policy may not cover the use of my Golf Cart / LSV by others.

Owners Signature: \_\_\_\_\_