

# NON-HWY VEHICLE REGISTRATION



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

Owner Name: \_\_\_\_\_ Driver License # \_\_\_\_\_

Owner Address: \_\_\_\_\_ Owner Phone # \_\_\_\_\_

Make Vehicle : \_\_\_\_\_ Model Vehicle \_\_\_\_\_

Vehicle ID # / Serial Number: \_\_\_\_\_

Insurance Company Name \_\_\_\_\_ Agent Name : \_\_\_\_\_

Address of Insurance Company \_\_\_\_\_ Insurance Phone # : \_\_\_\_\_

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

## PLEASE ATTACH A CERTIFICATE OF INSURANCE

I understand that operator must possess a valid driver's license, I understand the non-highway vehicle must operate in compliance with all city ordinances and all provisions of the Illinois Motor Vehicle Code (625 ILCS 5/1-101, et seq.) as amended from time to time. The vehicle may only be operated on streets where the posted speed limit is 35 MPH or less, the vehicle may not be operated on sidewalks and shall not be operated between the hours of 12:00 a.m. and 6:00 a.m. I understand I can only cross state highways at designated crossings.

\_\_\_\_\_

Signature of Owner

\_\_\_\_\_

Date

## OFFICER USE BELOW

### EQUIPMENT CHECK LIST:

BRAKES \_\_\_\_\_ BRAKE LIGHTS \_\_\_\_\_ TURN SIGNALS \_\_\_\_\_ STEERING APPARATUS \_\_\_\_\_ HEADLIGHT \_\_\_\_\_

REARVIEW MIRROR \_\_\_\_\_ TAIL LAMP \_\_\_\_\_ FRONT / REAR RED REFLECTORIZED WARNING DEVICES \_\_\_\_\_

SLOW MOVING VEHICLE EMBLEM \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

OFFICER SIGNATURE

\_\_\_\_\_

DATE

Non-Highway Permit No. \_\_\_\_\_