Gil	PIN TWP.	ATV/UTV	PERMIT APPLICATION	N
	(check one)	NEW	RENEWAL	
lame of Registered Ow	ner(s)			
	Name of O)perator(s)	Driver's License Number	(s)
				,
** الا Phone	-	nal operators o	n back of application**	
Address				
City		State	Zip	
ATV/UTV Year		Make	Model	
Insurance Carrier		Policy N	lo	
DCNR Registration No.	·			
Current Permit No				
Applicant Signature			Date	
***************	************	*****Office Use	*********	******
Fee: \$20 payable to GILPIN	TOWNSHIP			
Permit Number:			Issue Date:	
Approving Office	r Signature			_ Date

*All applications must be returned to the Gilpin Township Code Enforcement Officer for approval prior to operating. Failure to comply with all applicable laws and ordinances will result in the suspension or revocation of your permit.

** A permit application must be completed and submitted for EACH ATV/UTV obtaining a permit.

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