

JORDAN POLICE DEPARTMENT

Brett Empey - Chief of Police



APPLICATION FOR UTILITY TASK VEHICLE PERMIT

APPLICATION DA	TE:/	E	XPIRATION DA	TE:	/		
NAME:LAST	•	FIRST		MIDDLE		_	
DATE OF BIRTH: _	8					e	
ADDRESS:							
CITY/STATE/ZIP	TY/STATE/ZIP				PHONE		
DRIVER'S LICENSE	NUMBER		STATE		EXPIRA	TION	
UTV DESCRIPTION	:MAKE		MODEL		COI	LOR	
REGISTRATION:	STATE	NUMBE		EXPIRAT	ION		
INSURANCE:COMPANY			POLICY NUMBER				
(INSURANCE VERIFIC	CATION DOCUMENTS MUST	т ве сомри	LETED AND COPIED	PRIOR TO A U	ITV PERMIT	BEING ISSUED)	
	i) I hereby authorize the Jord license to those whose job I affirm that my utility task rearview mirror to provide	requires kn vehicle is e	owledge. quipped with worki	ng headlights,	. taillights, t		
SIGNATURE OF AP	PLICANT						
REVIEWED BY POL	ICE DEPARTMENT:						
POLICE DEPT. OFFI	CIAL		//_ DATE	(AUTHOR) IZED	() DENIED	
(Reason for Denial	:)	
PERMIT IS VALID F	OR ONE YEAR FROM T	HE APPRO	OVAL DATE.				

** APPLICANT RECEIVES A COPY OF CITY ORDINANCE 71.09, UTILITY TASK VEHICLE REGULATIONS

