



City of Hahira
102 S. Church Street
Hahira, GA 31632
229-794-2330

GOLF CART REGISTRATION

Date: _____

Owner's Name: _____

Owner's Address: _____

Owner's Telephone number: _____

Golf Cart Serial Number: _____

Make/Model of Golf Cart: _____

Color of Golf Cart: _____

Police Department Verification: _____

Tag Number Issued: _____

By signing below, Owner hereby acknowledges receipt of the Golf Cart Ordinance and agrees to abide by all requirements within the Ordinance.

Applicant Signature