ST. FRANCIS POLICE DEPARTMENT SNOWMOBILE PERMIT AGREEMENT \$15.00 ANNUAL PERMIT

	Office Use Only
	ICR # Permit #
	Permit
	Color
PERMIT HOLDER INFORMATION	<u>:</u>
FULL NAME:	DOB:
ADDRESS:	
HOME PHONE:	_ WORK PHONE:
CELL PHONE:	_
SNOWMOBILE INFORMATION:	
MAKE:	MODEL:
REGISTRATION NUMBER: _	
VIN #	
COLOR:	
POLICY AGREEMENT:	
ordinance within the city of St. Fran of my above stated snowmobile. I ac the city ordinance, my permit privile	nowmobile, agree to follow all rules/regulations of the snowmobile cis. I agree and understand that I am responsible for any and all drivers knowledge that if my snowmobile is found in violation of any aspects of ges will be forfeited. I have received a copy of the rules/regulations ee to follow all stated rules and regulations.
(PRINT FULL NAME)	
	(DATE)
(SIGNATURE)	