



TOWN OF CAROLINA BEACH
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Carolina Beach, North Carolina 28428
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GOLF CART PERMIT APPLICATION

Ordinance #08-765

A golf cart permit authorizes the operation of a golf cart on roads posted 35 miles per hour or less. The permit must be attached to the front, left side of the golf cart. No golf cart shall be driven without a permit.

The fee for the golf cart permit is \$10.00 for Carolina Beach residents and \$50.00 for non-residents and it expires December 31.

ATV's, Gators and Mules are NOT considered golf carts.

- All persons who operate or ride upon golf carts do so at their own risk and must be observant to the safety of themselves, their passengers, other motorists, bicyclists and pedestrians.
- The Town of Carolina Beach has no liability for permitting carts to be operated in the town. The owner and operator of the cart are responsible for any liability involved in using a cart. **Carts must have liability insurance coverage.**
- Drivers of carts shall stay to the far right of the road and yield the right-of-way to overtaking motor vehicles.
- Cart operating between one half hour before sunrise and one half hour after sunset shall be equipped with and have in use headlights and reflectors located on the rear of the cart.
- Carts shall have at least one operational mirror allowing the operator to see behind the cart.
- No one is allowed to stand on the cart while it is in operation and may only have the appropriate number of passengers that it is designed to carry.
- The operator of the golf cart must possess a valid driver's license or must have a driver's permit and be accompanied by a licensed driver.
- North Carolina laws as found G.S. § 20-138, regarding use of alcoholic beverages apply to golf cart regulation in the Town of Carolina Beach.

By signing below, I agree to follow the above rules and acknowledge that if I am found in violation of the above rules, I may be subject to fines and/or the revocation of my Town Golf Cart Permit.

Full Name: _____

Carolina Beach Address: _____

Non Resident Address: _____

Insurance Company: _____ Policy Number _____

Signature: _____ Date: _____

Office Use Only:

Decal Number: _____ Employee Name: _____