



City of Warrenton

200 West Booneslick

Warrenton, MO 63383

Phone: 636-456-3535 Fax: 636-456-8135

www.warrenton-mo.org

**APPLICATION FOR LOW SPEED (LSV), UTILITY VEHICLE (UTV), AND
RECREATIONAL OFF-HIGHWAY VEHICLES (ROV)**

FULL NAME OF APPLICANT _____
LAST FIRST MIDDLE

ADDRESS OF APPLICANT _____

OPERATOR LICENSE NUMBER _____ PHONE NUMBER _____

YEAR	MAKE	MODEL	V.I.N
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The vehicle described must be inspected by a qualified inspector. If the vehicle passes inspection, this form, will bear the signature of the qualified inspector.

PASS

- ☐ Head lamps
- ☐ Tail lamps
- ☐ Stop lamps
- ☐ Turn signals (LSV only)
- ☐ Reflectors (one on each side as far to the rear as practical)
- ☐ Reflectors (one, red in color, on rear)
- ☐ Exterior mounted mirror on driver's side of vehicle and either an external mounted mirror on the passenger's side, or an interior mirror (LSV only)
- ☐ Parking brake
- ☐ Windshield that conforms to federal motor vehicle safety standard on glazing materials as set forth in 49 CFR 517.202 (LSV only)
- ☐ A vehicle identification number which conforms to federal requirements of part 565 vehicle identification number as set forth in 49 CFR 565
- ☐ Seat belt assemblies conforming to federal motor vehicle standard #209
- ☐ A flag (not less than 30 square inches) extending not less than seven feet off the ground if the vehicle is not equipped with a roof
- ☐ The vehicle operates on not less than four wheels
- ☐ Not less than two thirty-seconds inch of tread depth remaining on each tire, no visible rubber separation, no threads or cords showing

This inspection is only to verify the above-described vehicle has met minimum equipment requirements as required by City Ordinance. I certify that I am employed by a business that offers motor vehicle repair to the public.

INSPECTED BY:

INSPECTOR NAME (PRINT)	INSPECTOR (SIGNATURE)	BUSINESS NAME/PHONE #	DATE INSPECTED
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City Use Only

Proof of Financial Responsibility: _____

Vehicle Type ☐ LSV ☐ UTV ☐ ROV

Operators License: _____

VIN # & Vehicle Type Verified: _____

Inspection Completed: _____

City Sticker Issued By: _____

Permit Fee: _____

**A COPY OF THIS APPROVED APPLICATION MUST REMAIN IN THE VEHICLE AT ALL TIMES
THIS APPLICATION IS GOOD FOR TWO (2) YEARS.**



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**LOW SPEED (LSV), UTILITY VEHICLE (UTV), AND
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I, _____, do hereby certify that the foregoing application is true and correct. I certify that the vehicle listed meets all requirements of Ordinances pertaining to Low Speed, Utility, and Recreational Off Road Vehicles operated within the City of Warrenton. Should any of the statements be subsequently proven inaccurate I understand the City of Warrenton may suspend or revoke my Approved Vehicle Permit. I understand that all permits expire and must be renewed every two (2) years.

Date: _____

Signed: _____

Subscribed, sworn to and affirmed before me this _____ day of _____, _____.

(Notary Stamp)

Notary Public, State of _____

My Commission Expires _____

Commissioned to the County of _____