



# Paulding County Board of Commissioners

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## *Marshal Bureau*

Watson Government Complex  
240 Constitution Boulevard, Dallas, Georgia 30132  
770-443-9768 • [www.paulding.gov](http://www.paulding.gov)

## **Process for Obtaining Motorized Cart Registration**

- Read Motorized Cart Ordinance at [www.paulding.gov](http://www.paulding.gov). Go to departments and select Marshal Bureau. On the right side is County Links that will have a link to the Motorized Cart Application which includes a copy of the ordinance or you can obtain a copy at the Marshal Bureau.
- Complete the Motorized Cart Registration and turn in along with the applicable registration fee.
- Complete the Motorized Cart Equipment Affidavit along with a picture of the actual motorized cart being registered.
- Owner of Motorized Cart must provide a valid Driver's License, a declarations page reflecting proof of insurance, and a copy of the Certificate of Origin (title) or bill of sale at the time of application.
- Once all paperwork is completed and approved, you will be issued two registration decals to be affixed on each side of the cart before operating. The decals will display your registration number.
- Your permit will be valid through December 31<sup>st</sup> of the year marked on your permit. A one year, three year or five year permit can be purchased at each renewal.

*Questions: Please contact Paulding County Marshal Bureau at 770-443-9768.*



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### Motorized Cart Registration

Registration Number: \_\_\_\_\_ Receipt Number: \_\_\_\_\_

1 yr. Registration \$15  3 yr. Registration \$45  5 yr. Registration \$75

#### CART INFORMATION:

VIN/Serial # \_\_\_\_\_ Cart Year \_\_\_\_\_ Color \_\_\_\_\_

Make\* \_\_\_\_\_ Type GAS/ELECTRIC (circle one)

**\*Note:** State Law mandates that motorized carts weigh under 1,300 pounds and **cannot exceed 20 mph**. If your vehicle does not comply, it cannot be legally registered or used on designated roads or recreation paths.

#### OWNER INFORMATION:

Name: \_\_\_\_\_ Are you 18 years or older? YES/NO (circle one)

#### Physical Address of Owner & Cart

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Subdivision \_\_\_\_\_ Phone # \_\_\_\_\_

Alt. Phone # \_\_\_\_\_ Email \_\_\_\_\_

#### PLEASE READ CAREFULLY:

I have read the County's Motorized Cart Ordinance. I understand and will abide by Paulding County and state laws pertaining to motorized carts as described in the ordinance. I have obtained the proper insurance requirements as noted in the ordinance and provided a copy with this application. I understand that, as the registered owner, I accept both legal and civil responsibility for any actions committed during the operation and use of the cart and understand I will be charged for any violation of Article IV Sec. 70-101 through 70-110.

\_\_\_\_\_  
Owner Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Notary

\_\_\_\_\_  
Date



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## Motorized Cart Equipment Affidavit

All motorized carts shall have the following equipment affixed and in good working order per County Ordinance 7-106: *(Please initial each requirement)*

- \_\_\_\_\_ A braking system for the weight and passenger capacity of the vehicle, including a parking brake;
- \_\_\_\_\_ A reverse warning device functional at all times when the directional control is in the reverse position;
- \_\_\_\_\_ A main power switch. When the switch is in the “off position,” or the key or other device that activates the switch is removed, the motive power circuit shall be inoperative. If the switch uses a key, it shall be removable only in the “off” position;
- \_\_\_\_\_ Head lamps and tail lamps
- \_\_\_\_\_ Reflex reflectors
- \_\_\_\_\_ A horn
- \_\_\_\_\_ A rearview mirror
- \_\_\_\_\_ Safety warning labels
- \_\_\_\_\_ Hip restraints and hand holds

In addition to the equipment required above, **gasoline operated motorized carts** shall have the following equipment affixed and in good working order:

- \_\_\_\_\_ An exhaust system, meeting the following specification:
  1. The exhaust system shall include the piping leading from the flange of the manifold to and including the muffler and exhaust pipes and shall include any and all parts specified by the manufacturer
  2. The exhaust and its elements shall be securely fastened
  3. The engine and powered mechanism shall be so equipped, adjusted and tuned as to prevent the escape of excessive smoke or fumes.

\_\_\_\_\_ All motorized carts will have stickers affixed to the back lower left portion of each side of the cart. See attached photo on next page. If the motorized cart is sold, destroyed, or no longer owned by you, you will need to remove the decals and return them to the office. This will ensure the registration does not come back to you in case an incident occurs that requires the cart owner to be held liable for violations and/or damages.



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I have read and understand the above information. I hereby certify that the information contained in this affidavit is true and complete to the best of my knowledge. The Paulding County Marshal Bureau and Paulding County Sheriff's Department are authorized to make any investigations pertaining to the inspection of the information provided above. By signing this affidavit, I understand this is an official document. Any false, fictitious, misleading, or fraudulent statements are subject to punishment under Official Codes of Georgia Title 16, Chapter 10 § 20 as a felony with a penalty of one to five years imprisonment.

\_\_\_\_\_  
Owner Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Notary

\_\_\_\_\_  
Date



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## Motorized Cart Owner Release

### CART INFORMATION:

VIN/Serial # \_\_\_\_\_ Cart Year \_\_\_\_\_ Color \_\_\_\_\_

Make\* \_\_\_\_\_ Type GAS/ELECTRIC (circle one)

**\*Note:** State Law mandates that motorized carts weigh under 1,300 pounds and **cannot exceed 20 mph**. If your vehicle does not comply, it cannot be legally registered or used on designated roads or recreation paths.

### REASON FOR RELEASE (select one)

Sale/Trade/Loss of Cart \_\_\_\_\_ Moved \_\_\_\_\_ Decal Destroyed \_\_\_\_\_

**NOTE:** Immediately report stolen carts to the Paulding County Sheriff's Department.

### OWNER INFORMATION:

Name: \_\_\_\_\_ Street Address \_\_\_\_\_

Phone # \_\_\_\_\_ City/State/Zip \_\_\_\_\_

### PLEASE READ CAREFULLY:

I certify that the information contained herein is correct to the best of my knowledge.

\_\_\_\_\_  
Owner Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Notary

\_\_\_\_\_  
Date