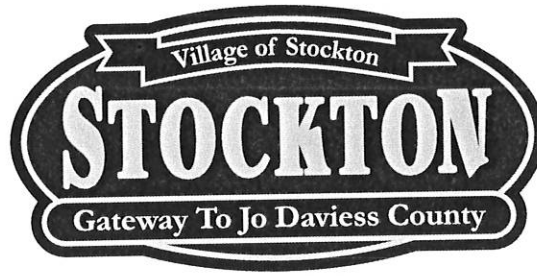


155 West Front Avenue
P.O. Box 186
Stockton, IL 61085
Phone (815) 947-2515
Fax (815) 947-3413



Rodney Brandt
Village President
Susanne Young
Village Clerk
Rena Eden
Village Treasurer

www.villageofstockton.com

PERMIT APPLICATION UTV

Applicant Name: _____

Applicant Address: _____ City/State/Zip _____

Applicant Phone Number: _____ DOB _____

Applicant Driver's License Number _____ State: _____

Insurance Carrier (or photo copy of current liability insurance card)

Insurance Company Name: _____

Address: _____

Phone Number: _____

Policy Number: _____

UTV:

Make: _____

Model: _____

VIN Number: _____

Description: _____

Attach copy of valid driver's license and insurance card