



# Commercial Quadricycle Permit Application

Pursuant to Chapter 817 Battle Creek, MI Code of Ordinances

Business Information			
Business Name:			
Address:			
City:	State:	ZIP Code:	Phone:
Business E-mail:		Business Website:	
Applicant Information (person principally in charge of operation of business)			
Name:		Title:	
Maiden Name or Aliases:		Home Address:	
City:	State:	Zip Code:	Phone:
Michigan Driver's License #:		Date of Birth:	
Ownership Type			
<input type="checkbox"/> Individual/Sole Proprietor <input type="checkbox"/> Sole Member LLC <input type="checkbox"/> LLC		<input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Other (specify) _____	
<b>A. Complete this section if you marked individual/Sole Proprietor or Sole Member LLC</b>			
Name:		Title:	
Maiden Name or Aliases:		Home Address:	
City:	State:	Zip Code:	Phone:
Michigan Driver's License #:		Date of Birth:	
<b>B. Complete this section if you marked Partnership, LLC, Corporation or Other</b>			
Official Corporate Name:			
Corporate Address:			
City:	State:	ZIP Code:	
E-mail:		Phone:	
Michigan Corporate/LLC ID #		Date of Incorporation/Qualification:	
List all Owners, Partners or Corporate Officers			
Name:		Title:	
Maiden Name or Aliases:		Home Address:	
City:	State:	Zip Code:	Phone:
Name:		Title:	
Maiden Name or Aliases:		Home Address:	
City:	State:	Zip Code:	Phone:
Name:		Title:	
Maiden Name or Aliases:		Home Address:	
City:	State:	Zip Code:	Phone:
<b>Attach an additional sheet if there are more persons to list</b>			
Will alcohol be served? ___ Yes ___ No		Will alcohol be sold? ___ Yes ___ No	
If you plan to serve/sell alcohol, you will need a Liquor License issued by the MLCC as well as Liquor Liability Insurance.			

**Quadricycle Vehicle Information (list each quadricycle to be used in the City of Battle Creek)**

Trade Name:		Serial Number	
Number of Seats:	Color:	Length:	Width:
Trade Name:		Serial Number	
Number of Seats:	Color:	Length:	Width:
Trade Name:		Serial Number	
Number of Seats:	Color:	Length:	Width:

**Attach an additional sheet if there are more quadricycles to list****Additional Documents Required**

In order for this application to be complete, you must also submit the following documents:

- \_\_\_ A copy of the applicant's valid Michigan driver's license
- \_\_\_ Quadricycle Driver Permit Application(s) and copy of each driver's valid Michigan driver's license
- \_\_\_ Certificate of insurance with a minimum combined single limit of \$2,000,000 for all persons injured or for property damage which shall name the City of Battle Creek and its officers and employees and agents as additional named insureds
- \_\_\_ A completed Commercial Quadricycle Vehicle Inspection form for each vehicle requiring licensing
- \_\_\_ Documentation that each driver has completed the required quadricycle training program provided by the quadricycle owner
- \_\_\_ Liquor License issued by the MLCC (if applicable)
- \_\_\_ Liquor Liability Insurance (if applicable)

Term: February 1 – January 31. Please allow 14-21 business days for processing.

NON-REFUNDABLE annual fee: **\$250.00**; **\$10.00 Replacement tag**

Please submit your completed application, all additional required documents and required fees to:

City of Battle Creek  
 Clerk's Office  
 10 N. Division Street, Room 111  
 Battle Creek, MI 49014

Any quadricycle owner failing to obtain a valid permit in accordance with City Ordinance Chapter 817 is responsible for a Class D Municipal civil infraction and shall be subject to the civil fines provided in Section 202.98 and any other relief that may be imposed by the court.

If you have any questions please contact the Battle Creek Clerk's Office at (269) 966-3348 or via email at [cityclerk@battlecreekmi.gov](mailto:cityclerk@battlecreekmi.gov).

**The Applicant is responsible for sufficient familiarity and working knowledge of the ordinance requirements. A copy of Chapter 817 is available on the City of Battle Creek website at [www.battlecreekmi.gov](http://www.battlecreekmi.gov).**

I hereby certify that the information provided above is accurate to the best of my knowledge. I agree to operate the aforementioned business in compliance with the guidelines established pursuant to Chapter 817 of the Codified Ordinances of Battle Creek, Michigan. In addition, I agree to cooperate with the investigator/inspector assigned to screening this application.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

**FOR OFFICE USE ONLY**

Please conduct your inspection and forward your recommendations to the Clerk's Office

**Risk Management**       Approved       Denied      Signature: \_\_\_\_\_

Comments: \_\_\_\_\_

**Chief of Police**       Approved       Denied      Signature: \_\_\_\_\_

Comments: \_\_\_\_\_



CITY OF BATTLE CREEK  
**COMMERCIAL  
QUADRICYCLE VEHICLE  
INSPECTION**

Pursuant to Chapter 817 Battle Creek, MI Code of Ordinances

COMPANY NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

TRADE NAME: \_\_\_\_\_ COLOR: \_\_\_\_\_

SERIAL NUMBER: \_\_\_\_\_ NUMBER OF SEATS: \_\_\_\_\_

LENGTH: \_\_\_\_\_ WIDTH: \_\_\_\_\_

**INSPECTION LIST**

	<b>PASS</b>	<b>REJECT</b>
Bell or horn.....	_____	_____
Brakes, in good operating condition.....	_____	_____
Front and rear turn signals.....	_____	_____
Headlight visible from 500 feet.....	_____	_____
Rear red reflector (visible from a distance of 100 feet to 600 feet when directly in the front of low beam head lamps of a motor vehicle).	_____	_____
Rearview mirror.....	_____	_____
Reflectors (one on each wheel and at each corner of the vehicle).....	_____	_____
Tires/wheels in good condition.....	_____	_____
Seatbelts for passengers.....	_____	_____
No visible damage or missing parts.....	_____	_____
Springs, axles, and supporting structure in good condition.....	_____	_____
Vehicle clean and sanitary condition.....	_____	_____
Tail lights in good operating condition.....	_____	_____
Speedometer.....	_____	_____
Wheels firmly attached to the hub.....	_____	_____

**This vehicle complies with the provisions of the Michigan Vehicle Code and the standards of safety and licensing requirements for Commercial Quadricycles described in Chapter 817 of the Battle Creek City Code.**

INSPECTED BY: \_\_\_\_\_

DATE: \_\_\_\_\_