



PERSONAL TRANSPORTATION VEHICLE
(PTV)
PTV OWNERSHIP CHANGE OF ADDRESS

PTV Information

VIN/SERIAL # _____
(include all letters & numbers)

Make* _____
**Note: O.C.G.A. §40-1-1 (43.1) mandates that PTVs weigh 1,375 pounds or less and cannot exceed 20 mph or motor vehicles weighing 1,300 pounds or less which cannot exceed 20 mph that were authorized to operate on local roads prior to January 1, 2012. If your vehicle does not comply, it cannot be legally registered or used in accordance with the City of Roswell Code of Ordinances, Sections 22.7.2 and 22.7.6.*

OWNER INFORMATION

Name _____

New Physical Address of Owner & Cart:

Street Address _____

City _____

State _____ Zip Code _____

Phone # _____

E-mail _____

For Office Use Only:
Amount Paid: _____ Date: _____
Receipt #: _____
Authorization: _____
Utility Acct. YES / NO Walk-In / Mail-In
Handicap Decal
State Authorization? Decal Issued?
YES / NO YES / NO
DECAL # ISSUED _____

CITY OF ROSWELL
38 Hill Street, Suite 210
Roswell, GA 30075
Phone: 770-641-3759
www.roswellgov.com

Current Decal # _____
(if applicable)

PTV Year _____ Color _____

Type GAS / ELECTRIC (circle one)

Are you 16 years of age or older? YES / NO (circle one)
(ONLY PERSONS 16 YEARS OF AGE OR OLDER AND
HOLDING A VALID DRIVER'S LICENSE MAY OPERATE A
PTV)

New Mailing Address (if different):

Address _____

City _____

State _____ Zip Code _____

AFFIDAVIT:

I have received the City's "Personal Transportation Vehicle (PTV) Information" brochure. I understand and will abide by City of Roswell Ordinances and State laws pertaining to Personal Transportations Vehicles (PTV) as described in the brochure. I acknowledge that city ordinance requires me to have liability insurance for my PTV. I understand and acknowledge that, as the registered PTV owner, I have legal responsibility for any actions committed during the operation and use of the PTV, including those of any agents I allow or authorize to use my PTV, and understand that I can be charged for any violation of Article 22.7 of the Roswell Code of Ordinances. I certify that the information supplied by me contained herein is correct to the best of my knowledge.

Owner Name _____
(Printed)

Owner Signature (required) _____ Date _____

NOTE: Immediately report stolen carts to the City of Roswell Police Department. Submit a release of liability form with 10 days of changes in ownership (sale, transfer, relocation of owner, or destruction of PTV).