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Breese Police Department

500 North First Street • Breese, IL 62230
618-526-7226 • Fax 618-526-4693



D.A.R.E.

Drug Abuse Resistance
Education

Robert Fix

Assistant Chief

James Hummert
Chief

Alternative Transportation Application

Applications Needed:

1. Inspection Form Signed by Inspector
2. Hold Harmless & Release of Liability
3. Proof of Insurance
4. Check for \$35.00 Payable to City of Breese
5. Copy of Driver License





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Rules Regarding Alternative Transportation City of Breese

1. Must be resident of the City of Breese
2. Must be 21 years of age or older
3. Vehicle must be inspected to insure that the vehicle is safe to operate in City streets.
4. The Handicapped applicant must submit a certificate signed by a physician, that the applicant is able to safely operate a motorized vehicle on roadways designated.
5. The applicant must provide evidence of insurance in compliance with the provisions of Illinois statutes regarding minimum liability insurance for passenger vehicles to be operated on the roads of the State of Illinois.
6. The City of Breese may suspend or revoke a permit granted hereunder upon finding that the holder thereof has violated any of the provisions of this ordinance or if there is evidence that the permittee cannot safely operate the motorized vehicle on the designated roadways.
7. Any persons who violates any provisions of this ordinance shall be guilty of a petty offense and shall be punished by a fine of \$ 75.00.
8. Every person operating a Alternate vehicle pursuant to permit hereunder on designated City streets has all the rights and duties applicable to a driver of any other vehicle pursuant to the state highway traffic laws and regulations except when those provisions cannot reasonably be applied to motorized vehicles.
9. Vehicles cannot exceed posted speed limits.
10. A person who drives or is in actual physical control of a Alternative vehicle on a roadway while under the influence is subject to section 11-500 through 11-502 of the Illinois Compiled Statutes (625 ILCS 5/11-500 thru 11-502).
11. Vehicles cannot be operated on City sidewalks or in City Parks other than parking lots.
12. Alternative Vehicles cannot be operated on streets and highways owned and operated by the State of Illinois Department of Transportation or the Clinton County Highway Department except to cross at designated crossing points. The City of Breese will insure that signs are erected to designate authorized points.



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Permits

1. No Person shall operate a Alternative Vehicle without obtaining a proper permit from the Breese Police Department. Permits shall be granted for a one (1) year period and renewed annually. The cost of this permit is \$ 35.00. Insurance coverage is to be verified prior to renewing permit.
2. Every Application for a permit shall be made on a form supplied by the Breese Police Department and shall contain the following information:
 1. Name and address of the applicant
 2. Name of Liability Insurance Carrier
 3. Description and serial number of vehicle
 4. Signed Waiver of liability by applicant releasing the City of Breese from any and all future claims resulting from the operation of their vehicle on City Streets
 5. Photo copy of applicable liability coverage card for vehicle to be operated on said City Streets.

Alternative Vehicles Addressed:

1. Golf Carts, both electric and Gas powered
2. All-Terrain utility vehicles with the following equipment:
 1. Brakes
 2. Steering Wheel
 3. rubber tires
 4. Rear View Mirror
 5. Headlights that emits 500 ft to front
 6. A tail light that emits at least 100 feet from rear
 7. Turn signals on front and rear
 8. Brake lights
 9. Slow Moving Vehicle Signage on rear of vehicle



Alternative Transportation Inspection Report

Date of Inspection: _____ Time of Inspection: _____

Applicant Name: _____

Vehicle Make: _____ Serial Number: _____

Please Check (X) to indicate compliance

Horn _____ Brakes _____ Turn Signals _____

Steering Wheel _____ Tires _____ Rearview Mirror _____ Headlight _____

Tail Light _____ Brake Lights _____ Slow Moving Vehicle Emblem _____

The above described vehicle was inspected and is in compliance with regulations set forth by City Ordinances for operation within the City of Breese.

Inspector Signature: _____

Inspection Type: New _____ Renewal _____

UNCONDITIONAL AND FULL GENERAL RELEASE OF LIABILITY, WAIVER, DISCHARGE, AND COVENANT NOT TO SUE

This is a legally-binding UNCONDITIONAL AND FULL GENERAL RELEASE OF LIABILITY, WAIVER, DISCHARGE, AND COVENANT NOT TO SUE made by me, _____ (hereinafter referred to as Operator) to City of Breese (hereinafter referred to as the Village).

I FULLY RECOGNIZE THAT THERE ARE DANGERS AND RISKS TO WHICH I MAY BE EXPOSED BY OPERATING A GOLF CART OR UTILITY-TERRAIN VEHICLE ON CITY STREETS. THE FOLLOWING IS A DESCRIPTION AND/OR EXAMPLES OF SIGNIFICANT DANGERS AND RISKS ASSOCIATED WITH THIS ACTIVITY: INJURY TO MYSELF OR OTHERS, DAMAGE TO MY PROPERTY OR THAT OF OTHERS, DEATH OF MYSELF OR OTHERS.

IN NO EVENT SHALL THE CITY BE LIABLE FOR DIRECT, INDIRECT, SPECIAL, INCIDENTAL OR CONSEQUENTIAL DAMAGES, WHETHER ARISING IN TORT, CONTRACT OR ANY OTHER LEGAL THEORY, IN CONNECTION WITH OR ARISING OUT OF OPERATOR'S USE OF A GOLF CART OR UTILITY-TERRAIN VEHICLE ON CITY STREETS.

THE OPERATOR, AS OF THE DATE BELOW, SHALL HEREINAFTER SAVE, HOLD HARMLESS AND INDEMNIFY THE CITY AGAINST ANY AND ALL LIABILITY, CLAIMS, CAUSES OF ACTION, AND COSTS OF WHATSOEVER KIND AND NATURE INCLUDING, WITHOUT BEING LIMITED TO INJURY, DAMAGE, LOSS INCLUDING DEATH, RESULTING FROM, ARISING OUT OF, OR OCCURRING IN CONNECTION WITH MY USE OF THIS GOLF CART OR UTILITY-TERRAIN VEHICLE ON CITY STREETS.

I understand that the City has an Ordinance governing the use of qualified golf carts and utility-terrain vehicles on City streets and hereby agree to conform with all requirements of the City Ordinance at all times. I have had the opportunity to read said Ordinance and the "Rules Concerning Alternate Transportation for the City of Breese" and my signature below acknowledges that I will comply with this Ordinance and said Rules as well as all of the applicable traffic laws of the State of Illinois at all times when operating this golf cart or utility-terrain vehicle on City streets.

I, THEREFORE, AGREE TO ASSUME AND TAKE ON MYSELF ALL OF THE RISKS AND RESPONSIBILITIES IN ANY WAY ASSOCIATED WITH THIS ACTIVITY. IN CONSIDERATION OF AND RETURN FOR THE OPPORTUNITY TO OPERATE A GOLF CART OR UTILITY-TERRAIN VEHICLE ON CITY STREETS I RELEASE THE CITY (AND THE CITY COUNCIL, EMPLOYEES, AND AGENTS) FROM ANY AND ALL LIABILITY, CLAIMS AND ACTIONS THAT MAY ARISE FROM INJURY OR HARM TO ME OR OTHERS, INCLUDING DEATH, OR FROM DAMAGE TO MY PROPERTY OR PROPERTY OF ANY OTHER IN CONNECTION WITH THIS ACTIVITY. I UNDERSTAND THAT THIS RELEASE ALSO COVERS LIABILITY, CLAIMS AND ACTIONS CAUSED ENTIRELY OR IN PART BY ANY ACTS OR FAILURES TO ACT, INCLUDING BUT NOT LIMITED TO NEGLIGENCE, MISTAKE, OR FAILURE TO ENFORCE, SUPERVISE, OR MAINTAIN.

I assure the City that there are no health-related reasons or problems which preclude or restrict my participation in this activity. I further assure the City that I have adequate health and liability insurance necessary to provide for and pay any medical costs or property damage that may directly or indirectly result from my participation in this activity, and I will indemnify and hold the City harmless for any such medical costs or property damage.

I understand that this Release means I am giving up, among other things, rights to sue the City, its City Council, employees, and/or agents for injuries (including death), damages, or losses I may incur or cause. I also understand that this Release binds my heirs, executors, administrators, and assigns, as well as myself.

I HAVE READ THIS ENTIRE RELEASE, I FULLY UNDERSTAND IT, AND I AGREE TO BE LEGALLY BOUND BY IT.

WITNESSES:

Operator's Signature _____

Date _____

COPY

Alternative Transportation Permit

Date: _____

Applicant Name: _____

Address: _____

Applicant Drivers License: _____

Vehicle

Make/Model: _____ Serial Number: _____ Permit # _____

Instructions:

1. Complete this application and submit with inspection form, Insurance certificate, and hold harmless form.
2. Make Check Payable to City of Breese
3. Bring this form in person to, Breese Police Department, 500 North 1st, Breese, Illinois, 62230

This Permit expires on May 1st.

I have received and read the City of Breese's ordinances regarding this Transportation Permit. I understand that if I wish to operate this vehicle on City Streets that I am required to renew this permit annually, which requires an inspection and proof of insurance. By signing this application, I agree to maintain adequate insurance in accordance with the above referenced ordinance.

Signature: _____

City Hall Please Check

Inspection Form: _____ Hold Harmless Form: _____ Proof of Insurance: _____