



**City of Maplewood**  
 Office of the City Clerk  
 1830 County Road B East | Maplewood, MN 55109  
 651-249-2001 | 651-249-2957 (fax)  
[www.MaplewoodMN.gov](http://www.MaplewoodMN.gov)

Approved By:  
 City Manager  
 City Planner  
 Public Works  
 Fee Paid: \_\_\_\_\_  
 Receipt #: \_\_\_\_\_

## RECREATIONAL MOTOR VEHICLE

**JANUARY 1<sup>st</sup> THROUGH DECEMBER 31<sup>st</sup>, ANNUALLY**

*Guidance relating to Recreational Motor Vehicles is contained in the Maplewood City Code, Chapter 36, Article VII. All permit holders are required to be familiar with the provisions of this Chapter and with applicable Minnesota Statutes and federal regulations.*

### PERMIT APPLICATION CHECKLIST:

**To prevent delay, please ensure the following information is submitted.  
 Incomplete applications are not accepted and will be returned immediately.**

- Recreational Motor Vehicle Application:
- Permit Fee of \$15.00
- Letter of approval from property owner (if applicant is not the owner of the property on which the vehicle will be operated)

#### Applicant Information (primary operator of vehicle)

Name of Applicant \_\_\_\_\_

Address \_\_\_\_\_

Phone Number (\_\_\_\_\_) \_\_\_\_\_ E-mail Address \_\_\_\_\_

Square Footage of property on which vehicle is used (no more than one vehicle allowed on lots with less than 12,000 sq/ft) \_\_\_\_\_

Does applicant own or rent property on which vehicle will be operated?  Own  Rent

#### Recreational Motor Vehicle Information

Number of Vehicles \_\_\_\_\_ Types of Vehicles \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

#### Additional Vehicle Operator(s) Information (if applicable)

1. Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

Phone Number (\_\_\_\_\_) \_\_\_\_\_ E-mail Address \_\_\_\_\_

2. Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

Phone Number (\_\_\_\_\_) \_\_\_\_\_ E-mail Address \_\_\_\_\_

3. Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

Phone Number (\_\_\_\_\_) \_\_\_\_\_ E-mail Address \_\_\_\_\_

4. Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

Phone Number (\_\_\_\_\_) \_\_\_\_\_ E-mail Address \_\_\_\_\_

Renewal notice should be mailed to: \_\_\_\_\_  
\_\_\_\_\_

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**The data in this application will be used to approve your permit and shall be deemed public unless private by State Statute. The undersigned applicant makes this application pursuant to all the laws of the State of Minnesota and such rules and regulations as the City Council of the City of Maplewood may from time to time prescribe.**

**I will familiarize myself with the provisions of the Maplewood City Code, and with applicable Minnesota Statutes and federal regulations. This business will be conducted in compliance with the above regulations, statutes and ordinances, and it is understood that failure to do so may constitute grounds for denial, suspension or revocation of this permit.**

**I declare that the information I have provided on this application is truthful and I understand that falsification of answers on this application will result in denial of the application. I authorize the City of Maplewood to investigate and make whatever inquiries necessary to verify the information provided.**

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