

**Section V—Supplemental Application
Horse Drawn Vehicle Rides**

To Be Attached to the Applicant Information Section

Applicants Name _____

Location of Operations _____

General

How many years experience giving Horse Drawn Vehicle Rides? _____

What is the maximum number of rides given in one week? _____

What is the average number of rides given in one week? _____

What is the maximum number of Vehicles used at any one time? _____

What is the minimum driver age and experience requirement? (describe) _____

Vehicle Use

Are vehicles used at night? _____

Do your vehicle(s) have _____ hydraulic brakes _____ lights _____
reflectors/reflective tape _____ slow moving vehicle emblems _____ turn signals

Are any rides given on or cross over public roads? _____ If so, describe _____

Are any rides given on city and/or metropolitan streets? _____ If so, describe _____

Are you licensed by any governmental authority? _____ If so, describe _____

Operations

What are your gross receipts from Horse Drawn Vehicle Rides? \$ _____

<u>Activity</u>	<u>Max # of Vehicles</u>	<u>Max # Horses/Vehicle</u>	<u>Max # Passengers/Vehicle</u>
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Hay Rides

Sleigh/Sled

Buggy, Carriage

Other: _____