

All-Terrain Vehicle Permit to Deviate from Designated Route

DRIVER INFORMATION (maximum of 4 drivers)			
Primary Driver	Secondary Driver		
Third Driver	Fourth Driver		
Street Address of Primary Driver			
Telephone Number for Primary Driver	Email Address for Primary Driver		
ATV INFORMATION			
Plate No.	Year	Make	Model
PROPOSED ROUTE TO ACCESS DESIGNATED ROUTE (this route will be assessed and may be subject to changes)			
CONSENT FOR MESSAGING			
Do you consent to the City of Corner Brook sending you email, text and or telephone messages regarding the ATV Program or other urgent messages of happenings in the City?			
Types of Messages (check all you wish to receive)		Message Methods (check how you want to be notified)	
<input type="checkbox"/>	New ATV Routes or Restrictions	<input type="checkbox"/>	Telephone Notification
<input type="checkbox"/>	New Regulations or Bylaws	<input type="checkbox"/>	Text Notification
<input type="checkbox"/>	Road Closures or delays	<input type="checkbox"/>	Email Notification
<input type="checkbox"/>	Water Outages or Water Problems	<input type="checkbox"/>	All Notification Methods
<input type="checkbox"/>	Urgent Safety Messages		
<input type="checkbox"/>	Community Events		
SIGNATURE			
Signature	Print Name	Date	