

Automobile Race Track License

Application

Permit Application Center

City Hall / 555 Liberty St. SE / Room 320 / Salem, OR 97301-3513 503-588-6256 * baspac@cityofsalem.net

If you need help understanding this information, please call 503-588-6256.

Si necesita ayuda para comprender esta información, por favor llame 503-588-6256.

(For office use only)	
License #:	

License information

Brief description of business	
Type of racing permit	Auto racing Single auto racing Go-cart or motorcycles Single go-cart or motorcycle racing

Applicant information

	Applicant	Employer (if applicable)
Name		
Home address		
Mailing address		
Phone number		
Email address		

I have attached a list of names and addresses of all principals, partners, corporate officers, and stockholders holding more than 10% of voting stock. Not applicable Yes, list attached.

Business addresses in Oregon

Business name	Business address		

Background information (If necessary to answer any question completely, please attach an additional page.

Have you ever been ARRESTED for	No	Yes (state crime, arresting agency and date):
other than a minor traffic violation?		
Have you ever been CONVICTED for	No	Yes (state crime, arresting agency and date):
other than a minor traffic violation?		
List any PROBATION violations		
within the last 10 years		
(If necessary, please attach an additional page.)		

Track officials (Provide the name and residential addresses of all persons who will act as track officials, such as starters, timers, and judges. If necessary, attach an additional page.) **Position** Name **Address** Race schedule (Attach/provide a schedule of the days and hours during which contests will be conducted, including those days and hours when unmuffled gasoline engines will be used.) Practice schedule (Attach/provide a schedule of the days and hours during which practices will be allowed, including those days and hours when unmuffled gasoline engines will be used.) **Terms and conditions Correct information:** I certify I have read and examined this application and know the same to be true and correct. I certify that I have knowledge of the provisions of the Code governing the license for which I am applying. **Documentation:** I have attached or will provide the safety plan outlined in SRC 30.100. Electronic signature certification: By attaching an electronic signature (whether typed, graphical or free form) I certify herein that I have read, understood and confirm all the statements listed above and throughout the application form. I agree (initials): Authorized Signature: Print Name: _____ Date: _____

To submit:

Save the file to your computer and email to baspac@cityofsalem.net.