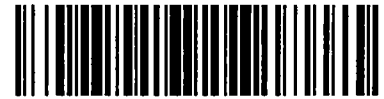




# City of Chicago



O2015-3135

Office of the City Clerk

## Document Tracking Sheet

<b>Meeting Date:</b>	4/15/2015
<b>Sponsor(s):</b>	Cardenas (12)
<b>Type:</b>	Ordinance
<b>Title:</b>	Handicapped Parking Permit No. 12275 - remove
<b>Committee(s) Assignment:</b>	Committee on Pedestrian and Traffic Safety

**BE IT ORDAINED BY THE CITY COUNCIL OF THE CITY OF CHICAGO:**

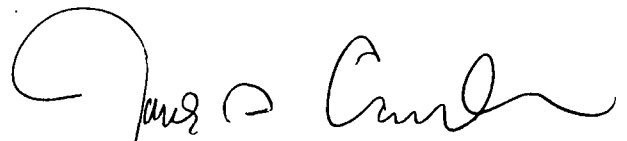
**SECTION 1. That an ordinance heretofore passed by the City Council prohibiting parking of vehicles at all times on portions of designated streets, be and the same is hereby amended by striking therefrom, the following:**

**“South Hoyne Avenue**

**at No. 3618  
Permit No. 12275.”**

**SECTION 2. This ordinance shall take effect and be in force upon its passage and publication.**

**Applicant / WALTER DURNAS**



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**GEORGE A. CARDENAS  
Alderman, 12<sup>th</sup> Ward**



City of Chicago  
Richard M. Daley, Mayor

Department of Revenue

Bea Reyna-Hickey  
Director

City Hall, Room 107A  
121 North LaSalle Street  
Chicago, Illinois 60602-1288  
(312) 747-4747 (IRIS)  
(312) 744-0471 (FAX)  
(312) 744-2975 (TTY)  
<http://www.cityofchicago.org>

12<sup>th</sup> WARD OFFICE - **AUDIT**

### DISABLED PERMIT PARKING REMOVAL APPLICATION

FOR SIGN REMOVAL REGARDING PROHIBITED PARKING

EXCEPT FOR DISABLED PERMIT NUMBER 12275  
(Please print or type)

NAME OF DISABLED INDIVIDUAL: Walter Burnas

REMOVAL LOCATION OF DISABLED PARKING SPACE REQUESTED  
3018 S. Hoyne Ave.  
(Please print or type current sign location address)

CHICAGO, ILLINOIS (ZIP CODE) 60609 (PHONE NUMBER) 773-593-8950

REASON FOR REMOVAL: resident no longer lives there

ILLINOIS VEHICLE LICENSE NUMBER: \_\_\_\_\_

ILLINOIS DISABLED PLACARD NUMBER: \_\_\_\_\_  
(Secretary of State Disable Placard)

CERTIFICATION: THE ABOVE INFORMATION IS CORRECT TO THE

BEST OF MY KNOWLEDGE: [Signature]  
(Signature of Applicant)  
Alderman's office audit

Jennifer Nunez  
12th ward  
CPA

FORWARD THIS COMPLETED APPLICATION TO YOUR ALDERMAN

APPLICANT: DO NOT WRITE BELOW THIS LINE

ALDERMANIC CERTIFICATION

[Signature]  
(Aldermanic Signature)

12  
(Ward)

3/31/15  
(Date)

AFTER APPROVAL, THIS APPLICATION IS TO BE FORWARDED TO  
COUNCIL SERVICES, BY THE ALDERMAN, AT THE TIME THE  
DISABLED SIGN REMOVAL ORDINANCE IS INTRODUCED

