



Office of the City Clerk

City Hall
121 N. LaSalle St.
Room 107
Chicago, IL 60602
www.chicityclerk.com

Legislation Details (With Text)

File #: O2011-1565
Type: Ordinance **Status:** Passed
File created: 3/9/2011 **In control:** City Council
Final action: 4/13/2011
Title: Handicapped Parking Permit No. 74244
Sponsors: Olivo, Frank
Indexes: Handicapped
Attachments: 1. O2011-1565.pdf

Date	Ver.	Action By	Action	Result
4/13/2011	1	City Council	Passed	Pass
4/6/2011	1	Committee on Traffic Control and Safety	Recommended to Pass	Pass
3/9/2011	1	City Council	Referred	

APPLICATION FOR DISABLED PARKING SIGN& PLEASE READ THE FOLLOWING CAREFULLY

74244

*P,
BEFORE COMPLETING THE FORM*

*a.-, application will no? be considered complete unless: T" "}' '-■
A« lines of the application have been completed in full. '■ 0 J4*^~-'
A check or money order for \$70.00 made payable to the City of Chicago is submitted as payment of the applic'n on .j Please note-' The application fee shall be waived for any person holding a valid, current disaoled veterans plat«i. y »v Disability "lust he permanent as evidenced by a copy of your valid disabled placard apd'or currni; vehicle n "v ,suited si the f.j, ;-;<:■ o? application: / Proof of residency, in the form of a copy of your drivers license, state identification, or utility bills are submitted at me time of applicator.
^mplsied application forms may be. returned to: the office of your alderman - any City of Chicago-Department of FtevBRut facility, or via mail at P.O. Box 803100. Chicago, IL 60680-3100, ATTN: Disabled Permitting Section. A \$25.00 main* fee will be biilec to yon annually. Should you have questions of concerns, please call our permit prvissiriq div&k/r 74-i-PARK {???S}.*

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.:10.Description.ol Medical Condition and Disability. "fy Q.uJq it 1<\$Cl fflA. ^ °?j. j Ai'.omyiivc Parking:

ng: Please note your application may be.deniad rf you hive'afterhative accessible bff^treet poking options

! "1. is mom off-street pacing avnilaDloat you: primary' residence {i.e., garage, car port, driveway, ptc,)?

12. il you answered Yes to aues.tfon. f.f, please describe: . ^Gsracje--■ □ Driveway: . □fCar Port: □■Other:

yes -Ji no

13.Is,youf ofi-strefli parking'accessible?)4 □ No. Pfease explain:

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14. Affirmation: I hereby affirm that the above information is true and correct. If the City of Chicago Department ol Revenue det«rrft:ocsi thai trio applicant has lalsey represented one or more of the above conditions, lhe applicant shall be.subject to a iins ol not loss then \$100 but no mom lh3n \$500, and the application shall be denied. I also understand that it is my responsibility to nolify lhe Dspartmuri of Revenue of any changes in the information provided.

FOR OFFICE -USE ONLY □ FEE

/^PLACARD/PLATE ^RESIDENCY

FRANK OLIVO

Alderman, 13th Ward
6500 S. Pulaski Road - 60629 Telephone: (773) 581-8000

CITY COUNCIL

CITY OF CHICAGO
COUNCIL CHAMBER
SECOND FLOOR, CITY HALL 121 NORTH LASALLE STREET
TELEPHONE: (312) 744-3076

COMMITTEE MEMBERSHIPS
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LICENSE and CONSUMER PROTECTION BUDGET TRAFFIC CONTROL and SAFETY ZONING

February 24, 2011

Honorable Patrick O'Connor Chairman
Committee on Traffic Control and Safety 121 N. LaSalle Street, Room 300 Chicago, IL 60602
Dear Chairman O'Connor:

I wish to override the following application for handicapped parking signs:
3613 W. 70th Street - #74244

Your assistance with this matter will be greatly appreciated. If you have any questions, please call
Shari Knight at (773) 581-8000.

With kindest personal regards, I remain
Sincerely,

Frank J. Olivo Alderman, 13th Ward