



Office of the City Clerk

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

Legislation Details (With Text)

File #: O2011-285
Type: Ordinance **Status:** Passed
File created: 1/13/2011 **In control:** City Council
Final action: 2/9/2011
Title: Handicapped Parking Permit No. 77479
Sponsors: Harris, Michelle A.
Indexes: Handicapped
Attachments:

Date	Ver.	Action By	Action	Result
2/9/2011	1	City Council		
1/13/2011	1	City Council	Referred	

**MEMORANDUM FOR TRAFFIC REGULATIONS
 OVERRIDE
 PROHIBITION AGAINST PARKING (Except for the Handicapped):**

Street, etc.:
South Clyde Avenue
Location, etc:
No. 8008

(Permit No. 77479)
Distance or extent:
Hours:
at all times

Days:
no exceptions

MAMIE G. GIBSON
MICHELLE A. HARRIS Alderman, 8th Ward

**APPLICATION FOR DISABLED PARKING SIGNS PLEASE READ THE FOLLOWING
 CAREFULLY BEFORE COMPLETING THE FORM**

77479

An application will not be considered complete unless: All lines of the application have been completed in full:
 A check or money order for \$70.00 made payable to the City of Chicago is submitted as payment of the application fee. Please note: The application fee shall be waived for any person holding a valid, current disabled veterans plus. Disability must be permanent; evidenced by a copy of your valid disabled veterans placard with current status. -ie - administrator-submitted at the time of application; » Proof of residency, in the form of a copy of your drivers license. sDue identification, or utility bills are <.v>br>Us.-.1 ■>. : trie t:-ne o' :ilpln::i!on.
 Completed application forms may be returned to: the office of your alderman, any City of Chicago Department of Revenue facility, or via mail at P.O. Box 303100, Chicago, IL 60680-3100. ATTN: Disabled Permittee Socman. A \$25.00 >na<;*ier>ancc> fee will be jr b:!!ed la vou awitailv. Should you have questions or concerns, please call our permit processing division at 312-744-PARK (7275).

1 Date of Birth
J..J3.//.....12^...i
 G:ijBLSia..y.!

2. State of Illinois: O-i Muml';;
 3 Drivers L::
 * Nu.Ti:.-

i
!0 ! / _ |

; t,! ji l-i:«! N;;h.:
• i.!'>.• Ati'.irass lj;;i;"3ry io;ic:onr;c!

froJftIKl ISlaUViQif^!.! 1^1 i 1 i | 1 i : 1 | M ItjQ^<j/

6. Address where Signs wiii bc> posted

Stiff-Er NijWjf n "i r.iii | SWCF.r NAMK

j.....i.

Phone Numbers

Home

2iiX_7iiJ^ILQLOii

E Curront Permanent Disabled Placard Numbet

BIKtlWSS

Registered to

9 Current L

Plate Nunibec

L^Q^ie.....£.....(ld.Jb&x±

Hagistorix; to Cily Sticfccr No.

K-?Litionf.!m Attpiicant

,-" ">i.!!or,Ki"!p to A;);)! ;;;■)■!'

6

.....j

| 10 Description of Mectcai Condition and Disability . -

; Alternative Parking: Please nolo your application may'be denied :*' yc.

U -lavd

W'W' r., /,-; /N'

alternative ncesstbio o<i-strtct parting -!r'

:: t^orr 'i:sti;-a; p;-k;jnr; ^vateio v^A';r-ii,-:yry r^iner-co

(i.d . iiar.-torx. ««' pott. drivew;;y. eics? i;> if vou .■;"---;-v«rtui v~; to <).jert on ii. ::<jji.«j ;!Kj;^A'ie-

■J•O'sJi"-;---;---: J **** ./.<,*; J L'.i.- i^ort: J Of ■■

li-/by J t>r

: tj.fs your oil-strtjet parting accessible'-' , , ; ,■

l_ JQTNo Ptoasc-explain^_ Cj3Jv£_ ^J/C|h^± . T'GLsf..

14 Afiiimauon: I hereby affirm that ihe above inlormation is ime and correct If the City of Chicago Ooparimfrfit y. P.cs-n<jt>.- txi.-r"«u.n that the applicant has falsely represented one or more ol ihe above conditions, the applicant shall bo subject :o a 'me -.if not l'J-ss than \$100 but no more than \$500. and ihe application shall bo dented. I also understand that it is my responsibility lo noifiy ;nr? Dt;pi<r!r!>cnt c.f Rovunoe of any changes in the information provided.

Sionaturo

/ />'

.....

Datv;

/

/

L

FOR OFFICE USE ONLY

^FEE

CARD/PLATE

SIDENCY

.-' 'iV'ri'> « C-r,-'-i.i. ■J COMPLETE u