



Office of the City Clerk

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

Legislation Details (With Text)

File #: O2011-1620
Type: Ordinance **Status:** Failed to Pass
File created: 3/9/2011 **In control:** City Council
Final action: 9/8/2011

Title: Handicapped Parking Permit No. 78053
Sponsors: Rice, John
Indexes: Handicapped
Attachments: 1. O2011-1620.pdf

Date	Ver.	Action By	Action	Result
9/8/2011	1	City Council	Failed to Pass	Fail
9/7/2011	1	Committee on Pedestrian and Traffic Safety	Recommended Do Not Pass	Pass
3/9/2011	1	City Council	Referred	

490-002 12/27/05

APPLICATION FOR DISABLED PARKING SIGNS 78053 PLEASE READ THE FOLLOWING CAREFULLY BEFORE COMPLETING THE FORM

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 plate.
- Disability must be permanent as evidenced by a copy of your valid disabled placard and/or current vehicle registration submitted at the time of application;
- Proof of residency, in the form of a copy of your drivers license, state identification, or utility bills are submitted at the time of application.

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 803100, Chicago, IL 60680-3100, ATTN: Disabled Permitting Section. A \$25.00 maintenance fee will be billed to you annually. Should you have questions or concerns, please call our permit processing division at 312-744-PARK (7275).

1. Date of Birth

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2. State Identification Number

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3. Drivers License Number

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4. Applicant Last Name

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First Name

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5. Home Address (primary residence)

STREET NUMBER DIR. STREET NAME

110 W 13th St

ZIP CODE

11013

6. Address where signs will be posted

STREET NUMBER DIR. STREET NAME, WARD NUMBER

1

7. Phone Numbers Home

Business

110

8. Current Permanent Disabled Placard Number

Registered to

Relationship to Applicant

9. Current License Plate Number

Registered to

City Sticker No.

15

Relationship to Applicant

10. Description of Medical Condition and Disability

Alternative Parking: Please note your application may be denied if you have alternative accessible off-street parking options.

11. Is there off-street parking available at your primary residence (i.e., garage, car port, driveway, etc.)?

YES NO

12. If you answered Yes to question 11, please describe:

Carport: Driveway; Car Port; Other:

None

13. Is your off-street parking accessible? Yes; No. Please explain: L

None

Yes;

7

14. Affirmation: I hereby affirm that the above information is true and correct. If the City of Chicago Department of Revenue determines that the applicant has falsely represented one or more of the above conditions, the applicant shall be subject to a fine of not less than \$100 but no more than \$500, and the application shall be denied. I also understand that it is my responsibility to notify the Department of Revenue of any changes in the information provided.

Signature

Date

1-

FOR OFFICE USE ONLY

FEE PLACARD/PLATE RESIDENCY COMPLETE

Jesse White - Secretary of State

License Expires

07-16-03

GILDA DE CICCIO 2929 N NEW LAND AVE CHICAGO IL.60634

OS 7B DRIVERS LICENSE

Birthdate 08-2CK36

Female 5'01" 130 lbs BLUE Eyes

Restrictions Type Class

B ORG D