



Office of the City Clerk

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

Legislation Details (With Text)

File #: O2011-197
Type: Ordinance
File created: 1/13/2011
Status: Passed
In control: City Council
Final action: 3/9/2011
Title: Handicapped Parking Permit No. 38743
Sponsors: Olivo, Frank
Indexes: Handicapped
Attachments:

Date	Ver.	Action By	Action	Result
3/9/2011	1	City Council	Passed	Pass
3/8/2011	1	Committee on Traffic Control and Safety	Recommended to Pass	Pass
1/13/2011	1	City Council	Referred	

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

SECTION 1. That an ordinance passed by the City Council prohibiting the parking of vehicles at all times except Handicapped #38743 be and the same is hereby further amended by striking there from the following: "South Lamon" "No. 6351 - Handicapped"

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

Frank J. Olivo Alderman, 13th Ward
1

City of Chicago Richard M. Daley. Mayor

Department of Revenue

Hugh P. Murphy

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Imp:/Aiuw.:i dti.il <http://dti.il>.ih

NEIGHBORHOODS

DISABLED PERMIT PARKING

REMOVAL APPLICATION

FOR SIGN REMOVAL REGARDING PROHIBITED PARKING

EXCEPT FOR DISABLED PERMIT NUMBER

38743

NAME OF DISABLED INDIVIDUAL:

(Please print or type.)

PAUL WOLLEK

REMOVAL LOCATION OF DISABLED PARKING SPACE REQUESTED:

6351 SOUTH LAMON

(Please print or type current sign location address.)

60638

CHICAGO, ILLINOIS (ZTP CODE)_(PHONE NUMBER)_

REASON FOR REMOVAL:

DECEASED

NAME AND ADDRESS OF PERSON CURRENTLY BEING BILLED FOR ANNUAL SIGN MAINTENANCE FEE: _

(Please provide information only if billing information differs.)

ILLINOIS VEHICLE LICENSE NUMBER: _

(W or V plates)

ILLINOIS DISABLED PLACARD NUMBER.

(Secretary of State Disabled Placard)

CERTIFICATION: THE ABOVE INFORMATION IS CORRECT TO THE BEST OF MY KNOWLEDGE: _

(Signature of Applicant) FORWARD THIS COMPLETED APPLICATION TO YOUR ALDERMAN. APPLICANT: DO NOT WRITE BELOW THIS LINE

ALDERMANIC CERTIFICATION:

(Aldermanic Signature)

13 1/13/11

(Ward)

(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.