Legislation Details (With Text)

File #:	O2011-1564		
Type:	Ordinance	**Status:**	Passed
File created:	3/9/2011	**In control:**	City Council
		Final action:	4/13/2011
Title:	Handicapped Parking Permit No. 72097		
Sponsors:	Olivo, Frank		
Indexes:	Handicapped		
Attachments:	1. O2011-1564.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	

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

An application will not be considered complete unless: t~~ ^-r"" ~~^V^ ^*

• All lines of the application have been completed in full; (^^^-^J/^C|^^)/ »•-[1]A check or money order for S703)0 made payable to the City of Chicago is submitted as payment oTihe application tee; Pfease 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; <-rp - I? I.

*f/Proof of residency, in the form of a copy of your drivers license, state iTrentificafio^, or utility Dills are^bmrae/fjanHfe V time of application. j I ^y//^^*

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
3. Drivers License Number

4. Applicant Last Name

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5. Home Address (primary residence)
STREET NUMBER DIR. STREET NAME

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6. Address where signs will be posted
STREET NUMBER OIR. STREET NAME

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warp number
7. Phone Numbers
Home

powered by Legistar™

Business
8. Current Permanent Disabled Placard Number
____, Registered to
Relationship to Applicant
9. Current License Plate Number
Registered to
City Sticker No.
Relationship to Applicant
10. Description of Medical Condition and Disability

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Alternative Parking: Pfease 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]£) YES □ NO (i.e., garage, car port, driveway, etc.)? _
12. W you answered Yes to question 11, please describe: j^Garage; Q Driveway; □ Car Port; □other
13. Is your off-street parking accessible? \
□ *Yes; Please explain:* fre LgQJeJ ^ht,J c ur~
14. Affirmation: I hereby affirm that the above information is tote 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 6hali be subject to a fine ot 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 tntorrnalion provided.
Signature

Date

□ FEE

PLACARD/PLATE Q 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
AVIATION - COMMITTEES RULES ano ETHICS FINANCE
LICENSE and CONSUMER PROTECTION BUDGET TRAFFIC CONTROL and SAFETY ZONING

March 4, 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:
3710 W. 60th Street - #72097
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