



Office of the City Clerk

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

Legislation Details (With Text)

File #: O2011-3067
Type: Ordinance
Status: Passed
File created: 4/13/2011
In control: City Council
Final action: 6/8/2011
Title: Handicapped Parking Permit No. 67457
Sponsors: Cardenas, George A.
Indexes: Handicapped
Attachments: 1. O2011-3067.pdf

Date	Ver.	Action By	Action	Result
6/8/2011	1	City Council	Passed	Pass
6/6/2011	1	Committee on Pedestrian and Traffic Safety	Recommended to Pass	Pass
4/13/2011	1	City Council	Referred	

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

SECTION 1. That an ordinance heretofore passed by the City Council prohibiting parking of vehicles at all times on portions of designated streets, be and the same is hereby amended by striking therefrom, the following:

"South Campbell Avenue at No. 4028
Permit No. 67457."

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

Applicant / Jesse P. Ortiz

©ffi*^<AECfcr(teARDENAS Alderman, 12th Ward

Apr 12 2011 3:30PM HP LASERJET FAX
773-523-8440

City of Chicago
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HANDICAPPED PERMIT PARKING

REMOVAL APPLICATION

"I FOR SIGN REMOVAL REGARDINC PROHIBITED PARXtNC EXCEPT FOR HANDICAP

PERMIT NUMBER;

(FLease pri.: \c oc cype.)

NAME OF HANDICAPPED INDIVIDUAL: OrIlXy ^RCg. ^ REMOVAL LOCATION OF HANDICAP PARKING SPACE
REQUESTED:

(Please print or type current sign location in CHICAGO, ILLINOIS UI? CODE) foO(a3<Z (PHONE NUMBER)

ve.

address.)

NAME AND ADDRESS OF PERSON CURRENTLY BEING BILLED FOR ANNUAL SIGN MAINTENANCE
FEE: _XgJLfaU* it* A^JLO_

(Please provide information only if billing information differs.) ILLINOIS

VEHICLE LICENSE NUMBER: __ (u or V places)

ILLINOIS HANDICAPPED PLACARD NUMBER:

(Secretary of State Handicap Placard)

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

Aft.

(Signature of applicant) FORWARD THIS COMPLETED APPLICATION TO YOUR ALDERMAN.

APPLICANT: DO NOT WRITE BELOW THIS LINE.'

!ALDERMANIC CERTIFICATION:

(Ward)

(Date)

AFTER APPROVAL. THIS APPLICATION IS TO BE FORWARDED TO COUNCIL SERVICES. THE ALDERMAN. AT THE
TIME THE HANDICAP SIGN REMOVAL ORDINANCE. IS INTRODUCED