

Legislation Text

File #: 02011-540, Version: 1

MEMORANDUM FOR TRAFFIC REGULATIONS OVERRIDE **PROHIBITION AGAINST PARKING (Except for the Handicapped):** Street. etc: West 73rd Street Location. etc: No. 3525 (Permit No. 65653) Distance or extent: Hours: at all times Days: no exceptions ADELA GAMEZ

xONALANE Alderman. 18th Ward

APPLICATION FOR DISABLED PARKING SIGNS PLEASE READ THE FOLLOWING CAREFULLY BEFORE COMPLETING THE FORM 65653

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 note¹ The application tee shall be waived tor any person holding a valid, current disabled veterans plate.

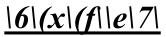
· Disability must be permanent as evidenced by a copy of your valid disabled placard and/or current vehicle registration submitted at the time of application;

 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). 2 State Identification Number

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1. Date of Birth MO ^ DAY 3. Drivers License Number 4. Applicant Last Name



MI First Name 5. Home Address (primary residence) STREET NUMBER | DIR. STREET NAME

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, WARD NUMBER 7. Phone Numbers Home

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i. Current Permanent C

8. Current Permanent Disabled Placard Number



Business

Registered to

<u>Ao/Ja Game?-</u>

Relationship to Applicant

9. Current License Plate Number . Registered to

City Sticker No.

Relationship to Applicant

10 Description of Medical Condition and Disability

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

11. Is there ott-street parking available at your primary residence (I.e., garage, car port, driveway, elc,)?_

□ no

12 If yokr answered Yes to question 11, please describe:

QKGarage:
Driveway;
Car Port;
Other:

13. Is your olf-street parting accessible? ~ _ x // " ~~Z QfWSW Vcifl

□ Yes; atfsic, Please explain: 1\$ tty* W in .

14. Aflirmation: I hereby affirm that the above information is true and correct. H the City of Chicago Deparimeni of Revenue datermines that lhe applicant has falsely represented one or more of the above conditions, the applicant shall be subject to a line of nol less than 5100 but no more than \$500, and the application shall be denied. I also understand thai II is my responsibility to notify the Department of Revenue of any changes in the information provided. Signatun

Date FOR OFFICE USE\ O^MLY \JI /IS S?. City of Chicago Richard M. Daley, Mayor Department of Rmmtc Bea ReyiH-Hickey Oi rector City Hull. RoomI07A 121 North LaSollc Street Chicago. Illinois S0602-1288 (3.12) 747-4747 (IRIS) (312) 744-0471 (FAX) (312) 744-297J (TTY) http7/www.ciiyofchiciigo <http://www.ciiyofchiciigo> org **December 3. 2010** ALDERMAN LONA LANE WARD 18 8146 S KEDZIE CHICAGO, IL 60652 Dear ALDERMAN LANE: The Department of Revenue has received a request for disabled parking signs. The Department initially did not recommend installation of signs. However, the applicant successfully appealed to the Mayor's Office for People with Disabilities (MOPD). Provided is the name and address of the applicant, the exact location proposed for the signs, and the permit number assigned. **Applicant's Name: ADELA GAMEZ**

Applicant's Address: 3525 W 73RD STREET

Address/Location of Signs: 3525 W 73RD STREET Permit Number: 65653 Work Order Number: H10-1388 Should you have any questions or require additional information, please contact our office at 312.742.7434. Very truly yours, Anthcmy Gambino Manager of Parking NEIGI ORH^jDS