



Office of the City Clerk

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

Legislation Text

File #: O2011-857, Version: 1

ALDERMAN MICHELLE A. HARRIS WARD 08
8539 S COTTAGE GROVE CHICAGO, IL 60619
December 29, 2010
Dear ALDERMAN HARRIS:

The Department of Revenue received a request for disabled parking signs to be posted in your ward. The application has been reviewed and a survey of the location has been conducted. The Department cannot recommend the application.

Provided is the name and address of the applicant, the proposed location of the signs, and the Department's reason for not recommending the application.

Applicant's Name: TABITHA JACKSON Applicant's Address: 7407 S EUCLID AVE

Reason Not-Recommended: ALTERNATIVE ACCESSIBLE PARKING Explanation: GARAGE AT LOCATION

Appeals must be filed within ten (10) days. Appeal requests must be made in writing and state reasons to support a request for a review. Appeals may be directed to the Mayor's Office for People with Disabilities (MOPD), Disabled Parking Signs Appeal, City Hall, Room 104, 121 N. LaSalle St., Chicago, IL 60602. A decision regarding an appeal will be made within thirty (30) days of the request. Applicants are notified by mail of the final decision.

Should you have any questions or require additional information, please contact our office at 312.742.7434.

Very truly yours,

Anthony Gambino Manager of Parking
cc: Mayor's Office for People with Disabilities

'mm

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

T'tA

• An appi^aiien will .K:i considered ^,omplote^ain(cij;j \ AHlirses of the application have been completed in full: -j
A check o- mulluy order lor.\$70.C'i niacin payiibi'.-to the-'City of Chicago'-is subletted payment oi the :.lop: n im; P'e. K-.o noif:- .The u^pi/cniion fee snail be waived'for
anyfperson holding a-valid; current^c';sac>ied veterans pi;-te.
.Discihility must be 'permanent as evidenced x>y a copy of .your valiU'disabied pl<;aid ahdfor cur.x-n: vef.i ■<.: resgfet.....v.,
sul^iilieihai.the Km c oi application; ■ :;..'.■ >.;■■■-l-'ipof-ol■residency, in the form ol a copy ofyjur covers license, slate identification, or utility hihs asa submitted al "se : ;
of :ipphCi:~^O~. ■
:-J...ViCbTipleiea application ;umi mat'.fas eMurned to. th-i dfiss of your aWeruam any City r; Chicago 0ep^rrv:---I ^~;"inoP A^A'Ac^V- o> via mail at P.O. 8ox 803100.
Chicago...IL 60680-3ioO-ATTN: Disabled Pormaiiny'Section. A S25.00. rrairne-.anctr. •;,'■'. ■'. :.iiii ■■■ill to '3,'ieti lo vou annua.ly. Snvuid you have q::yslio::l- c-r..CL>'noi?m'.
pit'ase ...til qui permit :: dcl;- divir:-."---to:v'-7J4-PARK (7275). '
f.....;-:-l'*.^!., o: i3i;h i 2. State lciienilicaiioiV Nn'mpe.-' j 3. Oi ivory. License Number .]- :-' j

< ;#>^T LI^T'lio |.j.....I I T i ' i;-:-t": .1 r \S&.....R-

M...M.....aa.....^7TCM'^^

.ii;- Aop'.iCant L.i.st f-i_i.-m:■

