



Office of the City Clerk

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Legislation Text

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City of Chicago Richard M. Daley, Mayor

Department of Revenue

Bea Reyna-Hickey Director

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<<http://www.ci.chi.il.us>>

DISABLED PERMIT PARKING REMOVAL APPLICATION

FOR SIGN REMOVAL REGARDING PROHIBITED PARKING

EXCEPT FOR DISABLED PERMIT NUMBER [50 7_

(Please print or type)

NAME OF DISABLED INDIVIDUAL:

REMOVAL LOCATION OF DISABLED PARKING SPACE REQUESTED:

(Please print or type current sign location address.)

CHICAGO, ILLINOIS {ZIP CODE}_ (PHONE NUMBER)_

REASON FOR

REMOVAL:

ILLINOIS VEHICLE LICENSE NUMBER:

(W or V plates)

ILLINOIS DISABLED PLACARD NUMBER:

(Secretary of State Disabled Placard) CERTIFICATION: THE ABOVE INFORMATION^ CORRECT TO ^{TUP} * BEST OF MY KNOWLEDGE:

5 INFORMATIONJS CORRECT TO THE ¹

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

APPLICANT: Hf) NOT WRITE BRIM X^{ms} ¹ ^ ALDERMANIC CERTIFICATION:

(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.