

Legislation Text

File #: O2011-1553, Version: 1

## APPLICATION pOR DISABLED PARKING SIGNS PLEASE READ THIS FOLLOWIF IG CAREFULLY BEFORE COMPLETING THE FORM

## 77403

An application will not T>e crj^isidered complete unless; i ; nnii\_N\*\_t

• All linfis nf the application have hefin rompleled in fill. TjJfAjJ' fl- I

• A check or money order lor \$70,00 made payable X (he City ol Chi; ;ago is submitted as payment of the application fee: Please note: The application fee shall be waived br any person hoi |mg a valid, current disabled veterans; plate

• Disability must be permanent as evidenced by a copy ol your valid iisabled placard and/wr current vehicle registration submitted al tho timo of application;

• Proof of residency, in the form of a copy of your di vprs license, stat j identification, or utility bills are submitted at lhe time of application Completed application forms may be returned to the olf ce of your alde man. any City of Chicago Department of Revenue facility, or via mail at PO. Box 803100. Chicago, IL BOtjE0-3100, ATTN, disabled Permitting Section. A \$25.00 mainlent-mw fee will be billed to you annually. Should you have qu-= s lions or concerns, please call our permit processing division at 312-744-PARK (7275).

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<u>4|\*4</u> 1 Date of Birth MO\_OAV <u>LJL.iL <http://\_LJL.iL>....|> IS 1<-</u> 2. Stale Identification dumber A Applicnnt I nsl Name 5 Homo Addioss (piim-iiy residence-) r:Tnrr.T Nuwinn

Joil I stilect NAME *H I Ok I r* 3.. Drivers License Number.

## PI^MsTsM°lsTH\*niM

First Nnmo «mh;i<\iiiiiii 6. Address where signs will be posted RTnrr-T Niiwnrn om ttmcct name,

\* I.<sup>1</sup>\* I AI "I I I S|m|» |r i <sub>S</sub> Mil . I -ill <sup>7. Phone Nuinbcis Homo</sup> \* I 1 I \* I M I

8 Current Permanent Disabled Placard Number feP> \ 'A^X

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