**File #:** O2011-1560, **Version:** 1

A-> app.!catto»:

# APPLICATION FOR DISABLED PARKING SiGNS PLEASE READ THE FOLLOWING CAREFULLY BEFORE COMPLETING-THE FORM

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Ail imes ol the application have been completed in full:'?[5]^"/^

## 74237 '

A check c! money eider for S70 00; made payable to.tfe'Gily of Chicago 15. su£n>ttert as p?ytntMit of t:v..
j?iease noie: The application fee shall be'waived for any person-holding a valid, cufranrdisaofed veterans piale. *[/;]/'[f] Di----.itiihiv must be permanent as evidenced fcy a copy of your w»Hcl disabled pi -.-art ..-id/o.- rurr.^t yp'm~ v-ytetritit-r [T'] suonrtitted at iha time? of application;- ^V-. - vx^-'b AciC' rv
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Completed application fcrrns may be returned to: hvj nflica of your alderman, any Cily ot Chicago Daoartmenr %>. Raw* tus-Eerily, tM v.'ii'ma'! ..•*, P.C Bcv *03100. Chi:v*gc. IL OCSSO-SlOO. ATTN: Disfehifd P.?»n*.....-jf?cu;o'-., [A] •. .iinl'-iarr-
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5. Horru* Address {primary residence)

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H'j'TIB

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Alternative Parking. Pidase note your applicahC![1] may be du^iod n you havo alternative Bccc;.»ibk» o!f-street par King Oj:: ms
t'.fe the:e off••;ir«et paring available at your primary restdcr-ce ~i YES NO I (i.e., garago. car port, drweway etc.)?

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J Gatafle; :J Diivway; 'J Car Port; J Other:
*13 (a yow off-sjraet parking accessible[7] St i*

## T.

14. Affirmation: t hereby aitirm that the above.tritorrnaiion is true and correct. II the City of Chicago Department-ol Revenue determines that Ihe applicant has fafse-'y represented one cr mora of-(he above condilions, the applicant shall be subject to a fine of net fsss than S100 but no more than $500. and the application shall Pa denied. I also understand that it is my responsibility (o notify the Dt-partmirtt vi< Revenue of anyjr^pges in the^orrnjitrtjrl provided.
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FOR OFFICE USE ONUY fy^ rt7~ft^ f" ' ■ j£l FEE

*1*

*VPL*
'^/PLACARD/PLATE"  ^RESIDENCY □COMPLETE