



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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NEIGHBORHOODS

DISABLED PERMIT PARKING REMOVAL APPLICATION **FOR SIGN REMOVAL REGARDING PROHIBITED PARKING EXCEPT FOR DISABLED PERMIT** **NUMBER 4** **NAME REMOV.**

CP lease print of type) SPACE REQUESTED:

W. VWd

(Please print or type current sign location address.) ^ CHICAGO, ILLINOIS (ZIP code) \ao (phone NUMBER) 773-/H
P? \&

REASON FOR REMOVAL: ILLINOIS VEHICLE LICENSE NUMBER:

(W or V plates)

ILLINOIS DISABLED PLACARD NUMBER;

(Secretary of State Disabled Placard)

CERTIFICATION: THE ABOVE INFORMATION IS CORRECT TO THE BEST OF MY KNOWLEDGE:

\A^dJ^ <S^fJy^^ IO^C^.

(Signature of Applicant)

FORWARD THIS COMPLETED APPLICATION TO YOUR ALDERMAN. APPLICANT: DO NOT WRITE
BELOW THIS LINE.

ALDERMANIC CERTIFICATION:

(Ward 40)

2>-g-ll

(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.
BUILDING CHICAGO TOGETHER.