



Office of the City Clerk

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Legislation Text

File #: O2011-1644, Version: 1

04/29/2009 WED 12:09 FAX 312 742 6999 CITY OF CHICAGO
0002/002

City of Chicago Richard M. Daley, Mayor
Department of Revenue
Bea Reyna-Hickey Director
City Hall, Room 107 121 North LaSalle Street Chicago, Illinois 60602
(312)747-4747 (IRIS) (312)744-0471 (FAX) (312)744-2975 CITY
<<http://www.cityofchicago.org>>

DISABLED PERMIT PARKING

REMOVAL APPLICATION

FOR SIGN REMOVAL REGARDING PROHIBITED PARKING EXCEPT FOR DISABLED PERMIT
NUMBER:

(Please print or type.)

NAME OF DISABLED INDIVIDUAL:

REMOVAL LOCATION OF DISABLED PARKING SPACE REQUESTED:

<^ix?iO LP ■ /k6//f S'}. _

(Please print or type current sign location address.)

CHICAGO, ILLINOIS (ZIP CODE) (pf) L\| (PHONE NUMBER). REASON FOR REMOVAL: M G\|_
715-7;o-ol(\

ILLINOIS VEHICLE LICENSE NUMBER:

? feets

3

BUILDING CHICAGO TOUETHBR

(W or V plate)

ILLINOIS DISABLED PLACARD NUMBER: P)Cl S""] O R f

(Secretary of State)

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

(Signature of Applicant)

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

ALDERMANIC CERTIFICATION:

(Ward)

(Aldennan Signal)

(Date)

AFTER APPROVAL, THIS APPLICATION IS TO BE FORWARDED TO COUNCIL SERVICES, BY THE ALDERMAN, AT THE
TIME THE DISABLED SIGNS REMOVAL ORDINANCE IS INTRODUCED .

