

Office of the City Clerk

City Hall 121 N. LaSalle St. Room 107 Chicago, IL 60602 www.chicityclerk.com

Legislation Text

File #: O2011-1994, Version: 1

City of Chicago Richard M. Daley, Mayor

January 3, 2011

Department of Revenue

Bea Reyna-Hickey Director

City Hall, Room 107A 121 North LaSalle Street Chicago, Illinois 60602-1288 (312) 747-4747 (IRIS) (312) 744-0471 (FAX) (312) 744-2975 (TTY) http://www.cityotchicago.org

ALDERMAN MICHELLE A. HARRIS WARD 08 8539 S COTTAGE GROVE CHICAGO, IL 60619

Dear ALDERMAN HARRIS:

The Department of Revenue recommends installation of disabled parking signs as described below. The application has been reviewed and a survey of the location has been conducted. Since the

applicant has met the requirements outlined in the Municipal Code, the signs will be installed.

Provided is the name and address of the applicant, the exact location proposed for the signs, and the permit number assigned. Please introduce an ordinance to post residential disabled parking signs at the location recommended, if one has not yet been introduced.

Applicant's Name: GILBERT SR. A HALE

Applicant's Address: 8035 S BLACKSTONE AVE

Address/Location of Signs: 8035 S BLACKSTONE AVE

Permit Number: 77484

Work Order Number: H10-1485

If the proposed ordinance is not passed within four months after its introduction, the permit shall be revoked and the restricted parking signs removed. Should you have any questions or require

additional information, please contact our office at 312.742.7434.

Very truly yours,

Antirony Gambino Manager of Parking Enclosure: Disabled Signs Application

City of Chicago Richard M. Daley, Mayor

December 30, 2010 Department of Revenue

Bea Reyna-Hickey Director

City Hall, Room 107A 121 North LaSalle Street Chicago, Illinois 60602-1288 (312) 747-4747 (IRIS) (312) 744-0471 (FAX) (312) 744-2975 (TTY)

http://www.cityofchicago.org

GILBERT SR. A HALE 8035 S BLACKSTONE AVE CHICAGO, IL 60619

Dear Applicant:

The Department of Revenue has recommended installation of disabled parking signs near your residence. Based on this recommendation, the signs for your restricted parking space will be installed. However, your application must be approved by City Council. If the proposed ordinance is not passed within four months after its introduction, the permit shall be revoked and the restricted parking signs removed.

The parking permit must be renewed annually. The fee is \$25.00. A renewal notice will be mailed one year from the date the signs are installed.

Please be advised that you are required to report any changes to the information provided on your original application to the City of Chicago Department of Revenue. You are also required by City law to notify the Department if you no longer

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meet the following permit qualifications:

- * You must hold either a valid, current disabled veteran's state registration plate or permanent person with disability license plate, permanent parking placard or device authorized by the Illinois Vehicle Code;
- * Any vehicle parked by you or for you in the designated area must bear the disabled license plate, permanent disabled parking placard or devices issued to you by the State of Illinois;
- * You must continue to reside at the home address listed on the original application.

A residential disabled parking permit will be issued to you by the City of Chicago. It must be placed on the right side of the dashboard. Only qualified vehicles displaying the permit are authorized to park in your restricted parking space. The permit number must be visible from outside your vehicle. The permit will be installed at:

Address/Location of Signs: 8035 S BLACKSTONE AVE Permit number: 77484

Should you have any questions or require additional information, please contact the City of Chicago's Helpline at 312.742.7434.

Anthoffy Gambino Manager of Parking Copy: ALDERMAN HARRIS

RL?EA|EREAt^ BEFORE COMPLETING THE FORM

An application will not be considered complete unless:

- · All lines of the application have been completed in full;
- » A check or money order for \$70.00 made payable to the City of Chicago is submitted as payment of the application fee; Please nole: The application fee shall be waived for any person holding a valid, current disabled veterans plate
- · Ois'ability'rTiust-ibeTpermanerit as evidenced by a copy of your valid disabled placard and/or current vehicle registration submitted\at'-th%tirne of application;
- « Proof of residency, in the form of a copy of your drivers license, state identification, or utility bills are submitted at the time of application:
- !..." Completed application forms may be returned to: Ihe office of your alderman, any Cily of Chicago Department of Revenue facility, or via-mail at P.O. Box 803100, Chicago, IL 60680-3100;;ATTN: Disabled Permitting Section. A \$25.00 maintenance i:;'.CY feeWill be billed to you annually. Should you have questions or concerns, please call our permit processing division at 3'T'2-k . 744-PARK (7275).

; - 4-,. Applicanf Last Name fell d

t.' Date of Birth 2. State Identification Number

Drivers License Numbet First Name

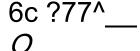


5. Home Address' (primary residence).. STREET NUMBER STBSET-NA.VE i'JEPCODE

MMiJJ-1

6. Address where signs willfbeposted STREET -NUMDE*} .. iDiai SmF.fr http://SmF.fr NA'.* i 7. Phone Numbers Home

+-6r-~Current Permanent Disabled Placard Number



Business Registered to Relationshiplo Applicant



9. Current License Plate Number Registered to

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City Sticker No.

Relationship to Applicant

ib. Description of Medical Condiliori and Disability

<u>/ eg^IIIA 1^1¹Act</u>

Parking: Plekse ni

Alternative Parking: PleasS note your application may be denied if you have alternative accessible off-street parking/options.

ii. Is there off-street parking available at your primary residence (i.e., garaga, car pott, driveway, etc.)?

□ YES

HO.

.12. If you answered Yes to question 11, ptease describe: J Garage: Driveway; Car Port; Other:

13.1s your olf-street parking accessible? ..□ Yes; . . □ No. Please explain;



14. Affirmation;:! herebyi-affirm that the above information is true and correct. If the City of Chicago Department of Revenue determines that the VarjplicOTt rtas or more of the above conditions, the applicant shall be subject to a tine jof not less than \$100 but no more than \$500, an||the application shall be denied. I also! understand that it is my responsibility to notify the Department of Revenue of any changes in the information provided. Signature

Date

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LACARD/PLATE

ESIDENCY

□ COMPLETE 0-y^c£_