



Office of the City Clerk

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

Legislation Text

File #: O2011-2015, Version: 1

DISABLED PERMIT PARKING

REMOVAL APPLICATION

City of Chicago Richard M. Daley, Mayor

Department of Revenue

Hugh P. Murphy Directo;

City Hall, Room 107 121 North LaSalle Street Chicago, Illinois 60602 (312) 744-6146 (312)7/(4.0471 (FAX) (312)7-14-2975 (TTY)

luip^/www.ci.chi.il.us

aUr^UINe CHICAGO TOCfTHLK

FOR SIGN REMOVAL REGARDING PROHIBITED PARKING

EXCEPT FOR DISABLED PERMIT NUMBEF

NAME OF DISABLED INDIVIDUAL:

(Please print or/

REMOVAL LOCATION OF DISABLED PARKING SPACE REQUESTED:

(Please print or type currenfsign location address,) CHICAGO, ILLINOIS (ZIP code). (PHONE NUMBER).

REASON FOR REMOVAL:.

NAME AND ADDRESS OF PERSON CURRENTLY BEING BILLED FOR ANNUAL SIGN MAINTENANCE FEE:

;-

(Please provide information only if billing information differs.) 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: _

¹ (Signature of Applicant) FORWARD THIS COMPLETED APPLICATION TO YOUR ALDERMAN. APPLICANT:

DO NOT WRITE BELOW THIS LINE

ALDERMANIC CERTIFICATION:

(AldermanicTsfigure)

(Ward)

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