Residential Disabled Parking Signs Information

Residential Disabled Parking was established to provide disabled City residents with convenient and accessible parking in close proximity to their residences.

Requirements and Conditions:

Disabled individuals who apply for signs must meet the following conditions to qualify for a restricted parking space:

The applicant must reside on a residential street that is zoned R-1 through R-5.

• The applicant must have either a current disabled Illinois license plate or a disabled placard issued by the Illinois Secretary of State.

The applicant must reside at the location for which the signs are being requested.

The applicant may not have access to off-street parking.

• The number of restricted parking spaces on the street does not exceed the maximum allowed on a residential street.

Fees

Sign installation and maintenance costs must be paid by the applicant.

The application fee for the signs is \$70.00. This fee must be submitted with the application.

• The applicant will be billed a \$25 maintenance fee on an annual basis.

• The application fee may only be waived if the applicant holds a valid, current disabled veterans state registration plate or provides a certification of approval under the Senior Citizens and Disabled Persons Property Tax Relief and Pharmaceutical Assistance Act, 320 ILCS 25/1, et seq., as amended.

How Residential Disabled Parking Signs Work

- Once a completed application is received, the City will process it as required in Section 9-64-050 of the Chicago Municipal Code. The City will approve the application if all requirements are met.
 - o If the Department of Finance recommends that the signs be installed, notice will be sent to the applicant, the Alderman's Ward Office, the Committee on Traffic Control and Public Safety and the Mayor's Office for People with Disabilities. The City Council will review the findings of the Traffic and Public Safety Committee and vote on the passage of the permit.

If the Department of Finance determines that signs cannot be recommended, notice will be sent to the applicant and the application fee will be refunded. The applicant may appeal the Department of Finance's decision to the Mayor's Office for People with Disabilities within 10 days of the denial.

• If approved, the City will erect two Disabled Parking Signs to mark a space of a minimum of 16 feet in the close proximity to the qualified applicant's residence and a Residential Disabled Parking Permit will be issued to the applicant.

 Only vehicles that display a disabled placard or disabled plate, as well as the Residential Disabled Parking Permit may park in the Residential Disabled Permit Parking space. Vehicles in violation of this ordinance will be ticketed

• The applicant must observe and comply with any other parking restrictions which may apply at the approved location (i.e. Street Cleaning signs, Rush Hour Parking restrictions, etc).



APPLICATION FOR DISABLED PARKING SIGNS

NOTE: All sections must be completed.

1. Date of Birth MO DAY YEAR	2, 1	Drivers License	or State ID N	lumber				
		1 1 7			l i	0		
3. Applicant Last Name			MI	First N	ame			
4. Home Address (primary residence)		, , , , , , , , , , , , , , , , , , , ,					ıı ZIP CODI	E
						1 1 1		
5. Do you rent or own? RENT OWN OTHER								WARD NUMBER
6. Phone Numbers Home / Ce	ell							
				I	L.	7		
7. Current Permanent Disabled Placard N	Number		Registered	to		Rela	ationship to A	Applicant
8. License Plate Number			Registered t	to		Rela	ationship to A	Applicant
9. Does the registered owner of the vehic	le reside at th	e address of th	e applicant?		YES [□ NO		
10. Is there off-street parking available at your primary residence?					11. Types Garage Driveway Dother			
12. If alternative parking is available, wh	y are you una	able to access	the space?					
13. Is this a permanent disability?	S NO	Note: Permit	is only availal	ble for pe	rmanent	disability		
14. Do you use assisted devices? YES	□ NO I	f yes, what type	e do you use?					
15. Are you able to walk 200ft? TYES	□ NO				ı			
Affirmation: Under penalties provided by law pursuant to correct. I acknowledge that, pursuant to Section 1-21-01 \$500 and not more than \$1,000, plus three times the city or omitting material information from this application may of any changes in the information provided or I may be s	0 of the Municipa 's damages, litiga y result in denial o	I Code of Chicago, tion costs, collection of the application. I	persons who mak n costs and attorn also understand the	e material ey's fees. I t hat it is my	false staten acknowledg responsibil	nents on this a le that providing ity to immediat	pplication may l g false informati ely notify the Do	be fined not less that ion on this application epartment of Finance
Signature					Date			
FOR OFFICE USE ONLY		RD/PLATE	☐ RES	IDENIC	Y	☐ COMF	DI ETE	
			<u> </u>			<u> </u>		
sabled Parking Application Payment Stub ease make check or money order payable	to the City o	of Chicago				TOTA	AL AMOU	INT DUE
	, to the Oity C	n Officago.						
e sure to submit the following:						 \$	70.00	

- A complete application for Disabled Parking Signs. All sections must be completed.
- · A copy of a valid permanent disabled plate or placard issued by the Secretary of State to the applicant at the address where the signs are to be posted.
- · Proof of residency for the address where the signs are to be posted (i.e., Driver's License or
- · A \$70.00 application fee by check or money order made payable to the City of Chicago.

TO ENSURE PROPER CREDIT PLEASE RETURN THIS STUB WITH YOUR PAYMENT

PLEASE:

- DO NOT send cash
- DO NOT send credit card information
- DO NOT staple the check or money order to the payment stub(s)
- DO NOT fold the payment stub(s)