CITY OF ALIQUIPPA 581 FRANKLIN AVENUE ALIQUIPPA, PA 15001

APPLICATION FOR HANDICAPPED PARKING (RESIDENTIAL ONLY)

Please Print

Applicant's Name:	
	Date:
This Application is: A Renewa	alA New Application
Location of Space Requested:	
If Different Location than Address, Please Explain Why:	
Are any of the following available at th	Off Street Parking Driveway
If Yes, provide explanation why it cannot be utilized: Nature/Severity of Disability:	
Vehicle Make:	bled Veteran) License Plate No.:Vehicle Model:
Vehicle Year:	VIN:
Is this vehicle modified to accommodar If Yes, please explain:	te your disability?YesNo
Applicant's Signature	Signature & Relationship of Person Completing Application if not Applicant FOR CITY USE ONLY
City Official:	Date:
Providing HP Reserved Parkin Adequate HP Reserved Parkin	garage appears to be available at residence ag may create an undue inconvenience to others g currently exists near residence verely disabled veteran license plate)