

CHESWICK BOROUGH
HANDICAPPED PARKING SIGN APPLICATION

Application Type

_____ Initial Application _____ Renewal Application

Applicant's Information

Name: _____

Address: _____

Phone: _____

Application Required Supplemental Documents:

_____ Pennsylvania Handicapped License / Valid Placard and Placard ID Card

_____ Proof of Residence

Fee

_____ Payment of Initial Fee (\$40.00) or Renewal Fee (\$5.00)

CERTIFICATION

I, _____, attest that all of the facts and information set forth in this application and the required supplemental documents are true and correct to the best of my knowledge.

Signature

Date

*****OFFICE USE ONLY*****

Date Received: ____ / ____ / ____

Payment Method: Cash _____ Check _____ (Check No. _____)

Received By: _____

Approved By: _____

Date of Approval: ____ / ____ / ____