

# HANDICAPPED PARKING SPACE APPLICATION

(Please keep this page for your reference)

For qualifying residents, the City of Greeley will install a "Disabled Parking Sign" to mark off a space of a minimum of 16 feet of sidewalk in the closest proximity to the qualified applicant's residence. These signs mark the space and only allow vehicles displaying a valid handicapped license plate or placard to park there.

#### If a handicapped space is granted, the following requirements will apply:

- Any vehicles displaying a handicapped person or disabled veterans license plate or placard may use any handicap parking space.
- The applicant must reside on a residentially zoned street
   <a href="https://greeleygov.com/docs/default-source/gis/pdfs/zoningofficialcffcd4c09bcf6c2b8a5fff0000bd1d61.pdf">https://greeleygov.com/docs/default-source/gis/pdfs/zoningofficialcffcd4c09bcf6c2b8a5fff0000bd1d61.pdf</a>
- The accessible parking space must be used as the primary parking space by the applicant person requesting the sign.
- The privilege of a handicap parking space will be discontinued with misuse.
- The applicant must notify the Public Works Department immediately; if and when they leave the address listed in the application; no longer have a disability; no longer possesses a valid handicapped license plate or placard; the handicap space is no longer needed.

### **PROCEDURE**

- 1. Complete an application form
- 2. Have a photocopy of a state-issued handicapped license plate or placard and related paperwork
- 3. Submit the application and photocopy of your handicapped placard to the City of Greeley via email at parking@greeleygov.com
- 4. You must have a handicap license plate or placard before youreturn the application to the City of Greeley.

There are three (3) pages attached. Please fill out all three pages of the included form and send them back together so that your application can be reviewed as quickly as possible. If you have any questions or concerns, please feel free to contact the Parking Services Department at <a href="mailto:parking@greeleygov.com">parking@greeleygov.com</a> or (970) 350-9641.



# **Handicapped Parking Space Application**

### **Section A**

| Applicant Information |                         |  |  |
|-----------------------|-------------------------|--|--|
| Name                  | Telephone Number        |  |  |
| Street Address        |                         |  |  |
|                       |                         |  |  |
|                       |                         |  |  |
|                       |                         |  |  |
|                       |                         |  |  |
| ection B              |                         |  |  |
| Ve                    | hicle Information       |  |  |
| Owner's Name          | Driver's License Number |  |  |
|                       |                         |  |  |

License Plate Number and Expiration Date

Vehicle Make & Year

If not your vehicle, why are you requesting a zone for a vehicle not registered to you?



## **Section C**

| Please Answer the Following Questions   |                   |             |
|---|-------------------|-------------|
| What is the nature of your disability/disabilities?   |                   |             |
|   |                   |             |
|   |                   |             |
| Explain why you require a reserved zone?  |                   |             |
|   | _                 |             |
| Do you use any implement to add mobility?   |                   |             |
| CrutchesBracesCaneW Other   | alker             | _Wheelchair |
| Do you have a garage or any other off-street parking?   |                   |             |
| If yes, please explain why you are requesting a reserved on-  | street parking sp | oace.       |
|   |                   |             |
| Do you have a valid handicapped license plate or placard?   | Yes               | No          |
| If yes, what is the number and date it expires.   |                   |             |
| You must have a valid handicapped license plate or placard before you can receive a handicap parking  |                   |             |
| space.  |                   |             |
| Are you the property owner of the home adjacent to where the space would be marked?                   | Yes               | No          |
| If <b>yes</b> , please <b>skip</b> section D  |                   |             |
| If <b>no</b> , please <b>complete</b> section D   |                   |             |
| Are there any other designated handicap parking spaces on your block? If yes, please list address(s): | Yes               | No          |
| spaces on your block: If yes, please list address(s).   |                   |             |
| Is there a fire hydrant alongyour frontage?   | Yes               | No          |
|   |                   |             |



### **Section D**

| Property  | y Owners of Rental Residence   |  |
|---|--|--|
| Тореге  | •  |  |
|   | (Applicant's name) has advised me that they g space, and if approved the city would install a handicapped tely or partially along my rental property.                  |  |
| Signature   | Date   |  |
| Print Name  | <u> </u>   |  |
| Telephone number  |  |  |
|   |  |  |
| Section E   |  |  |
| Signature   |  |  |
|   | r a handicapped parking space in accordance with Title 42 (42-4-1208) e, and with the disabilities listed above.   |  |
| It is a crime to give false or mislea legal action and fines. | ding information on this application. False information will lead to   |  |
|   | nis application I agree to notify the City of Greeley immediately ress set forth on this application or no longer have a disability or no ed license plate or placard. |  |
| Signature:  |  |  |
| Date:   |  |  |
|   | pped spaces will be reviewed by the Public Works   |  |
| Department on an annual I                                     | basis using the information provided in this application.  |  |