

ZONING OFFICE USE ONLY

Application Number _____

Date Issued _____

By _____

Date Returned _____

**APPLICATION FOR HANDICAP PARKING SIGN
FOSTER TOWNSHIP**

NAME: _____

ADDRESS: _____

PHONE: _____

SIGN LOCATION: _____

HP REGISTRATION NUMBER/PLACARD NUMBER: _____

Are you applying for a non-driving disabled person? _____ YES _____ NO

If you are a disabled driver answer the following accordingly.

Do you live alone? _____ YES _____ NO

Do you have an attendant OR home health aide on call? _____ YES _____ NO

Does the aide OR attendant have responsibility for your transportation? _____ YES _____ NO

DISABILITY

(to be completed by physician)

TYPE OF DISABILITY:

Cerebral Palsy _____

Multiple Sclerosis _____

Amputee (specify type) _____

Visual Impairment _____

Hearing Impairment _____

Arthritis _____

Other (explain) _____

Is disability permanent OR temporary? _____

If more than one disability is involved please explain _____

TYPE OF MOBILITY AID USED:

Wheelchair, Electric _____

Guide Dog _____

Other _____

Wheelchair, Manual _____

Crutches _____

Walker _____

None _____

Physician Signature: _____

Date: _____

Address: _____

Phone Number: _____

RESIDENCE/BUILDING INFORMATION:

Please describe type of residence/building: _____

Most accessible entrance: _____

Approximate distance between curb and entrance: _____

Is the residence/building located on a corner? _____ YES _____ NO

VEHICLE INFORMATION:

Type of motor vehicle that will be used:

Van _____ Regular Sized Auto _____

Compact Car _____ Station Wagon _____

Pickup Truck _____ Other _____

Make _____ Model _____

Color _____ Registration Plate Number _____

Is your motor vehicle specially equipped? _____ YES _____ NO

If so, state the type of equipment: _____

Will you be operating more than one motor vehicle: _____ YES _____ NO

If so, specify type and registration: _____

HANDICAPPED PERSON'S SIGNATURE: _____

APPLICANT'S SIGNATURE (if different from above): _____

DATE: _____

RETURN TO:

Foster Township Zoning Office
1000 Wyoming Avenue
Freeland PA 18224