

## **“Residential Handicapped Parking” Signs**

As a result of requests from citizens with disabilities and out of concern for the safety of those citizens, a policy for the use of Handicapped Parking Signs, in residential areas has been developed. These signs may be allowed in the city’s right of way to assist a resident with a disability but it is not a reserved parking space for that particular resident, it is a space that may be used by anyone that meets the requirements and has a Handicapped placard or license plate on their vehicle.

“Residential Handicapped” signs are subject to the following conditions:

- A. A written request from the family, or citizens involved must be received by the City Traffic Engineer for the area where signing is desired.
- B. The request shall be signed by the citizen or legal guardian for the handicapped child and shall include the following:
  - 1. Date
  - 2. Family’s street address
  - 3. Family’s home telephone number
  - 4. Name of the person with the handicap
  - 5. Certification of the vehicle that has the handicapped placard or license plate.
  - 6. Certification as to the description of the disability whether it is permanent or temporary, and if it is temporary what is the anticipated length of the disability.
- C. Signing may be considered for the resident that is applying for the Handicapped Parking Sign but it will only be considered for those who do not have off street parking.
- D. A maximum of one (1) sign per application will be installed for each situation. Sign locations will be determined by the City Traffic Engineer.
- E. Signs will be removed if the resident that has met the requirements of the city moves from that address.
- F. The Office of the City Traffic Engineer will review each location annually and eliminate any signs that are no longer needed.

Upon receipt of a request for “Handicapped Parking Signs”, the City Traffic Engineer shall provide an official request form to the person requesting the signs.

**APPROVED**

**Suffolk Public Works  
Traffic Engineering Division**

 10-1-07  
I. E. Rep. Date

# Request for Residential Handicapped Parking Signs

Date: \_\_\_\_\_

I hereby request a Residential Handicapped Parking Sign for our City Street because of the presence of the person in my home that has a disability named below:

**Name:** \_\_\_\_\_

**DOB:** \_\_\_\_\_

By signing this request, I agree to immediately notify in writing the City Traffic Engineer if: (1) the family moves; (2) the person no longer lives at this address; or (3) any conditions related to the person's disability materially change. I have attached a certification of the extent of the disability from a licensed physician, and a copy of the handicapped placard or registration card from the Division of Motor Vehicles. I understand the signs will be removed if at any time the resident no longer meets the city's requirements.

\_\_\_\_\_  
Street Address/City/Zip

\_\_\_\_\_  
Home Phone #

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print or Type Name

-----  
**(FOR OFFICE USE ONLY)**  
-----

Location Reviewed by: \_\_\_\_\_  
City Traffic Engineer, Representative (print or type name)

Recommend \_\_\_\_\_ signs be installed on \_\_\_\_\_

\_\_\_\_\_  
(print or type name of street or route)

Recommend denial (Reason: \_\_\_\_\_)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Signs installed Date: \_\_\_\_\_

\_\_\_\_\_ Signs removed Date: \_\_\_\_\_