

“BLIND CHILD AREA” Signs

As a result of requests from parents of children with vision impairments and our concern for the safety of those children, a policy for the use of “BLIND CHILD AREA” warning signs has been developed. These signs may be allowed on City maintained non-limited access roadways of the Primary or Secondary System. Specifications for this sign are attached.

BLIND CHILD AREA signs are subject to the following conditions:

- A. A written request from the family involved must be received by the City Traffic Engineer for the area where signing is desired.
- B. The request shall be signed by a parent or legal guardian for the child and shall include the following:
 - 1. Date
 - 2. Family’s street address
 - 3. Family’s home telephone number
 - 4. Name and birth date of child with a vision impairment
 - 5. Certification of the child’s extent of sight loss from a licensed physician or optometrist.
- C. Signing may be considered for a vision impaired child up to and including the age of 12. The age limit, however, may be flexible depending on individual circumstances.
- D. A maximum of one (1) sign per approach will be installed for each situation. Sign locations will be determined by the City Traffic Engineer.
- E. Signs should normally be scheduled for removal when the child attains the age of 13. In cases where the impaired child moves from the immediate area or should the signs no longer be needed, it is the responsibility of the parent(s) or legal guardian(s) to notify the City Traffic Engineer so that the signs may be removed.

Upon receipt of a request for “BLIND CHILD AREA” warning signs, the City Traffic Engineer shall provide an official request form to the person requesting the signs. Attached is a sample letter that may be used when responding to requests for these forms.

Request for BLIND CHILD AREA Warning Signs

Date: _____

I hereby request BLIND CHILD AREA signs for our City road because of the presence of my child with vision impairment as follows:

Name: _____ **DOB:** _____

By signing this request, I agree to immediately notify in writing the City Traffic Engineer if: (1) the family moves; (2) the child no longer lives at home; or (3) any conditions related to the child's vision impairment materially change. I have attached a certification of the extent of my child's vision impairment from a licensed physician or optometrist as required. I understand the signs will be removed when the child reaches the age of 13.

Street Address/City/Zip

Home Phone #

Signature of Parent/Legal Guardian

Print or Type Name

(FOR OFFICE USE ONLY)

Location Reviewed by: _____, City Traffic Engineer
(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: _____