

Persons with Disabilities Certification for Parking Placard

DIRECTIONS: Both sides of this document must be signed and completed, side A by the physician and side B by the applicant.

DEFINITION: "PERSONS WITH DISABILITIES: (6245 ILCS 5/1-159.1)

"A natural person who, as determined by a licensed physician: (1) cannot walk 200 feet without stopping to rest; (2) cannot walk without the use of, or assistance from, a brace, can, crutch, another person, prosthetic device, wheelchair, or other assistive device; (3) is restricted by lung disease to such an extent that his or her forced (respiratory) expiratory volume for one second, when measured by spirometry, is less than one liter, or the arterial oxygen tension is less than 60 mm/hg on room air at rest; (4) uses portable oxygen; (5) has a cardiac condition to the extent that the person's function limitations are classified in severity as Class III or Class IV, according to standards set by the American Heart Association; or (6) is severely limited in the person's ability to walk due to an arthritic neurological, or orthopedic condition."

(Please fill in the applicant's name, describe the condition, and indicate the impairments below.)

Person with Disabilities Name _____

Condition _____

Cannot walk 200 feet without stopping to rest.

Cannot walk without the assistance of another person, prosthetic device, wheelchair, or other assistive device.

Is restricted by lung disease to such a degree that the person's forced (respiratory) expiratory volume (FEV) in one second, when measured by spirometry, is less than one liter.

Uses portable oxygen.

Has a Class III or Class IV cardiac condition according to the standards set by the American Heart Association.

Is severely limited in the person's ability to walk due to an arthritic, neurological, or orthopedic condition.

LENGTH OF DISABILITY:

Condition is temporary—expected duration (in months) _____ (Not to exceed 3 months)
(Renewal can be obtained with resubmittal of required application)

I hereby certify that the physical condition of the person with disabilities listed herewith constitutes him/her as person with disabilities as described under 625 ILCS 5/1-159.1.

Physician's signature

Physician's license number

PLEASE PRINT OR TYPE BELOW:

Physician's Name _____

Address _____

City _____ Zip _____

Telephone) _____

APPLICATION CAN BE MAILED OR BROUGHT IN TO: Office of the City Clerk, CITY OF DARIEN, 1702 Plainfield Road, Darien, IL 60561

DIRECTIONS: Both sides of this document must be signed and completed in its entirety in order for the application to be processed. Complete Part 1, if the person with disabilities is applying for a disabilities parking placard. Complete Parts 1 and 2, if member of the person with disabilities immediate family is applying for a disabilities parking placard.

PART 1. PERSON WITH DISABILITIES

I hereby apply for a Disabilities Parking Placard under statutory provision, (625 ILCS 5/1-159.1) and certify that my physical condition entitles me to the issuance thereof. I am also aware that the person with disabilities parking device must not be used unless I am a passenger in the vehicle.

_____ Date

_____ Applicant's Signature

PLEASE PRINT OR TYPE BELOW:

Applicants Name		Address	
City	ZIP	Telephone ()	
Driver's License # or State ID #			
Please Provide the following information for the primary vehicle(s) used to transport the applicant:			
Vehicle 1: Vehicle Identification # _____		Plate # _____	
Vehicle 2: Vehicle Identification # _____		Plate # _____	

PART 2. FAMILY MEMBER

Family Member's Name		Date	
Address		City	ZIP
Relationship of member to person with disabilities		Telephone ()	

FOR OFFICE USE ONLY

TEMPORARY PERMIT # _____

Expiration Date _____

Issued by _____

Issue Date _____

WARNING: MISUSE OF OR FALSE APPLICATION FOR THE PERSON WITH DISABILITIES PARKING DEVICE can result in its revocation, a 30-day driver's license suspension, and a fine up to \$1,000. The person with disabilities must be present when parking the vehicle in areas reserved for such person or for free at metered spots.