

Check List
for
HANDICAPPED PARKING SIGNS
Borough of Munhall

APPLICANT'S NAME: _____

APPLICANT'S ADDRESS: _____

APPLICANT'S TELEPHONE #: _____

I. APPLICANT - Does the applicant:

1. Possess a handicapped plate and/or placard?
Yes: _____ . No: _____ .
2. Reside in or own property in the Borough of Munhall?
Yes: _____ . No: _____ .

II. LOCATION -

1. How many on-street parking spaces are situated at curbside directly adjacent to the site and within two hundred feet (200') of an entrance to the residence? _____ .
2. Does the property have a garage within two hundred feet (200') of an entrance to the residence?
Yes: _____ . No: _____ .
If "YES", how many cars can be accommodated by this garage? _____ .
3. Does the property have other off-street parking (c.g. a driveway) within two hundred feet (200') of an entrance to the residence?
Yes: _____ . No: _____ .
If "YES", how many cars (estimated) can be accommodated by this parking area? _____ .
4. Are there unique topographic problems in accessing:
 - a. the garage (if applicable)?
Yes: _____ . No: _____ .
 - b. the other off-street parking areas (if applicable)?
Yes: _____ . No: _____ .
 - c. the available on-street parking spaces (if applicable)?
Yes: _____ . No: _____ .
5. Is there another designated "handicapped parking" space(s) within a reasonable distance of the subject property?
Yes: _____ . No: _____ .

III. NOTICE -

Has the applicant been advised that if a sign is issued, he/she must re-apply not earlier than December 1st nor later than December 31st of each calendar year for the re-issuance of the sign?

Yes: _____

No: _____

IV. NOTES & COMMENTS -

V. APPROVAL or DENIAL -

A. FIRST ISSUANCE -

For the reasons outlined herein, I hereby respectfully recommend to Council that the request by the above named applicant for the installation of a handicapped parking sign be:

APPROVED: _____, or

DENIED: _____

Signature: _____

Date: _____

B. RE-ISSUANCE - This applicant has applied for the RE-ISSUANCE of a handicapped parking sign which has already been previously approved by Council and: for the reasons outlined herein:

a. I hereby administratively

APPROVE: _____ said request; or

b. I hereby respectfully recommend to Council that this request be

DENIED: _____

Signature: _____

Date: _____