



SPRINGETTSBURY TOWNSHIP APPLICATION FOR DISABLED PERSON OR SEVERLEY DISABLED VETERAN RESTRICTED PARKING SPACE

**For General Questions or Comments Regarding Compliance
Go to Springettsbury Township's Website – Springettsbury.com
Click on Township Municipal Ordinances
Refer to Article IV- General Parking Regulations Section 312-42.**

The undersigned hereby applies for a disabled person or severely disabled veteran restricted parking space within the Township under **Disabled Person or Severely Disabled Veteran Restricted Parking Spaces, Chapter 312, Article IV, General Parking Regulations, Section 312-42**, of Springettsbury Township, York County, Pennsylvania.

☐ NEW APPLICATION (\$25.00 FEE, NON-REFUNDABLE)

☐ RENEWAL

NAME: _____

DRIVER LICENSE NUMBER: _____

ADDRESS: _____

VEHICLE MAKE: _____ VEHICLE MODEL: _____

VEHICLE REGISTRATION NUMBER: _____ STATE: _____

REASON FOR REQUEST: _____

ESTIMATED DURATION OF DISABILITY: _____

IS OFF STREET PARKING AVAILABLE AT THE RESIDENCE: YES ☐ NO ☐

LOCATION OF OTHER RESTRICTED
PARKING SPACES ON APPLICANTS STREET: _____

DATE OF APPLICATION: _____

SIGNATURE OF APPLICANT: _____

DOES APPLICANT POSSESS A VALID PENNDOT ISSUED DISABLED PERSON OR SEVERLEY
DISABLED VETERAN PLACARD OR LICENSE PLATE: YES ☐ NO ☐

VERIFIED BY: _____ DATE: _____

-----**FOR DEPARTMENT USE ONLY**-----

LICENSE FEE FOR NEW APPLICATION \$25.00 (NON-REFUNDABLE)

APPLICATION AND FEES RECEIVED BY: _____

DATE RECEIVED: _____

APPLCATION: APPROVED ☐ REJECTED ☐

TOWNSHIP APPROVAL:

BY: _____

TITLE: _____

TOWNSHIP REJECTION:

BY: _____

TITLE: _____

RESAONS FOR REJECTION: _____

