

**Millersburg Borough
Handicapped Parking Sign Application**

Per the terms of Millersburg Borough Ordinance No. 2-19, this application shall be used to apply for a reserved handicapped parking space. Fill out all information on this application and return to the Borough Manager. Incomplete or illegible applications may be rejected or delayed.

For residential use only:

Name of applicant: _____

Address of Applicant: _____

Phone or email: _____

Make, Model and Year of vehicle: _____

Name of Caregiver (if any): _____

Applicant (check one) Does Does Not have a handicapped placard or plate issued by the Pennsylvania Department of Transportation

Handicap is (check one) Temporary Permanent

If temporary, indicate approximately when reserved parking will no longer be needed: _____

In the lines below, you may indicate where on the property you believe a spot should be placed. Please note, this does not guarantee a spot will be awarded or that it will go in the spot requested. Please consider your own mobility, your most common uses for your property and vehicle, and any potential seasonal weather that could impact a spot.

For business use only:

Name of Business: _____

Address of Business: _____

Nature of Business: _____

By signing below I understand and agree to the following:

1. The Borough will be charging a fee for installation of the necessary signage.
2. (Residential Only) The applicant shall reapply for a renewal application on or before the second Monday in January.
3. (Residential Only) Applicant shall report any of the following status changes:
 - a. Discontinuation of the handicapped status
 - b. Moving to a new house
 - c. Change of a primary vehicle

Signature of applicant: _____

For internal use only

Date Received: _____

Date of Council Review: _____

Approved?: _____

Date of Sign Installation: _____

Comments: _____