

**JERMYN BOROUGH**

**440 JEFFERSON AVENUE  
JERMYN, PA. 18433**

**Phone 570-876-0610**

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APPLICATION FOR HANDICAPPED PARKING SIGN:  
THIS APPLICATION IS RENEWED YEARLY.

A HANDICAPPED SIGN WILL NOT BE PROVIDED IF THE  
APPLICANT HAS OFF-STREET PARKING .

Date \_\_\_\_\_

The applicant must have a physical impairment ,such as loss  
of the use of lower extremity or a cardiopulmonary condition  
which restricts movement or requires the use of a  
wheelchair,crutches,walker or similar device.

NAME: \_\_\_\_\_ Telephone \_\_\_\_\_

ADDRESS: \_\_\_\_\_

Vehicle information ( year,make) \_\_\_\_\_

Vehicle Registration Plate HP no: \_\_\_\_\_

HP Placard No. \_\_\_\_\_ Expiration DATE \_\_\_\_\_

Please answer yes or no:

1. Does applicant use a wheelchair,crutches ,walker or similar device . \_\_\_\_\_
2. If no to number 1 ,does applicant have a cardiopulmonary condition which  
results in restriction of movement. \_\_\_\_\_
3. Does applicant have arthritis . \_\_\_\_\_

Note: Penalty for any fraudulent use of the handicapped space will result in  
immediate termination of such privilege.

If you have a PLACARD please include a copy with application.