



# Renewal for Residential Disabled Parking Space

Original Permit #: \_\_\_\_\_ Renewal Date: \_\_\_\_\_ Fee: \$50  Paid

The City of Urbana | Engineering Department  
205 South Main Street, Urbana, Ohio 43078 | (937) 652-4324 | www.urbanaohio.com

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED. Submittal of an application does not constitute acceptance for processing until the Engineering Division reviews the application for accuracy and completeness. **Please remit the non-refundable fee with this completed form.**

## General Information

Name of Authorized Applicant: \_\_\_\_\_

Address of Applicant: \_\_\_\_\_

NUMBER STREET CITY ZIP

Please select one:  Rent  Own

Daytime Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

OHIO BMV Issued:  Driver License  ID card (Indicate which type by selecting one of the options) Registration Number \_\_\_\_\_ (verified by Urbana Police Division)

OHIO BMV Issued:  Driver License  ID card (Indicate which type by selecting one of the options) Registration Number \_\_\_\_\_ (verified by Urbana Police Division)

### OHIO BMV Disability Placard:

Placard #: \_\_\_\_\_  Temporary  Permanent Date Issued \_\_\_\_\_ Expiration Date \_\_\_\_\_

Placard #: \_\_\_\_\_  Temporary  Permanent Date Issued \_\_\_\_\_ Expiration Date \_\_\_\_\_

## Applicant's Affidavit

The undersigned hereby agree(s) to abide by all terms and conditions provided to him/her/them by the City of Urbana, and in consideration of the benefits received. The information contained herein is correct to the best of his/her/their knowledge. The undersigned understands that knowingly falsifying this information may be grounds for the denial or revoking of this application and subsequent approval thereof.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

### Office Use Only

Application Received on: \_\_\_\_\_ Date \_\_\_\_\_ by \_\_\_\_\_ Initial \_\_\_\_\_

Fee Received on: \_\_\_\_\_ Date \_\_\_\_\_ by \_\_\_\_\_ Initial \_\_\_\_\_  
 Cash  Debit/Credit Card  Check # \_\_\_\_\_

Police Division Approval for Eligibility: \_\_\_\_\_ Date \_\_\_\_\_ by \_\_\_\_\_ Initial \_\_\_\_\_

Engineering Renewal of Eligibility: \_\_\_\_\_ Date \_\_\_\_\_ by \_\_\_\_\_ Initial \_\_\_\_\_

This Application is:  Approved  Denied

Letter of Approval Issued: \_\_\_\_\_ Date \_\_\_\_\_ by \_\_\_\_\_ Initial \_\_\_\_\_