



City of Coatesville

Handicapped Parking Sign Application Form

I am requesting that a Handicapped Sign be posted in front of or near my residence. I have attached a copy of my current registration certifying that I am handicapped and require the use of a "Handicapped Parking Space".

Today's Date: _____

Name: _____

Address: _____

Phone Number: (____) _____

Tag Number: _____ Placard Number: _____

Printed Name of Person Making Request: _____

Signature of Person Making Request

Thank you!

Dispatcher Issuing Request: _____

Approval: _____

Marty Brice – Lieutenant; Coatesville Police Department