



City of Lancaster
Department of Transportation
 815 Lawrence Street
 Lancaster, Ohio 43130
 P: (740) 687-6668 F: (740)687-6694



Application for Parking Sign for Persons With Disabilities
 Request Form

Date: _____

Name: _____

Address: _____

Phone #: _____

Site check date: _____

Checked by: _____

Approved			
Date application mailed:	_____		
Date application returned:	_____		
Date application fee received:	_____		
Affidavit of Indigency requested:	YES	NO	Mailed: _____
Date location called in to OUPS:	_____		
Date installed:	_____		

Denied					
Reason for denial:	Disqualifying Factor:	#1	#2	#3	#4
Date denied:	_____				
Notes:	_____				