

RESERVED ON-STREET PARKING FOR PERSONS WITH DISABILITIES GENERAL INFORMATION

The following general information is provided for your use in determining eligibility and understanding the terms and conditions under which residents will be allowed to participate in this program.

Intent: The intent of Section 5-9-7:A of the Municipal Code and the rules established for this program are to afford residents with disabilities accessibility to their residences while imposing certain restrictions and limitations upon participation to ensure that the Village does not experience a proliferation of reserved parking zones for persons with disabilities on its public streets.

Reservation of Zone: If your application meets the criteria established in Section 5-9-7 and the rules of this program, you may upon the payment of the required fee have a reserved parking zone established in front of your residence. Although intended for your use, the zone will not be reserved for your individual vehicle and it is possible from time-to-time that other vehicles displaying official registration plates or decals issued to a person with disabilities will use this reserved parking zone. Should you find that other officially designated vehicles are regularly parking in the space intended for your use, please contact the office of the Village Administrator.

Qualifications for Participation: In order to participate in this program, the application must be made by or on behalf of a person with a disability. The application must include the medical certification form along with the other documents listed on the application form.

Availability of Off-Street Parking: Section 5-9-7 specifically provides that reserved residential street parking shall **not** be provided to any household or any person thereof if the occupants of the residential unit own, rent or have regular use of private driveways, carports or garages that give convenient access to the dwelling of the disabled or handicapped person.

Total Number of Reserved Parking Spaces Per Block: Section 5-9-7 restricts the number of reserved parking spaces for persons with disabilities to no more than twenty-five percent (25%) of the available parking spaces on each side of a block. Should reserved parking meet or exceed that percentage of the available parking space on any given block, no additional reserved parking privileges will be granted along said block.

Process for Application Review and Variance from Ordinance Provisions: The Assistant Village Administrator, Building Commissioner, and Public Works Director review applications for reserved on-street parking zones for persons with disabilities. If they unanimously decide that the application meets the requirements of Section 5-9-7 and the program rules, they may approve designation of the on-street parking zone.

If your application is denied, you may submit a request for variation to the Village Administrator, who may grant a variance to the requirements of Section 5-9-7 when such variance is necessary to overcome an exceptional physical condition, practical difficulties, or unnecessary hardship which prevent a person with disabilities from accessing their residence as intended by Municipal Code. All variance requests must be made using the enclosed **Exhibit B**.

If the Village Administrator declines to grant a variance, you may submit the request for variation to the Village's Traffic Safety Commission. The Commission will publicly hear and rule on requests for variances based on criteria set forth in Section 5-9-7:D.7. All decisions of the Traffic Safety Commission with regard to variance requests will be final.

Change in Status of Person with Disabilities: If the person with disabilities no longer meets the requirements of Municipal Code for a reserved space due to death, change of address, or relocation to another housing facility, it is the duty of the applicant for this parking privilege to notify the office of the Village Administrator of the Village of Morton Grove **immediately** so that signs can be removed.

Renewal: Each reserved parking space on a public street granted under this chapter must be renewed annually by May 1 of each year. A renewal application packet will be sent to current permit holders prior to the renewal date. The applicant's cancelled check will serve as a receipt and as proof of renewal for an additional year.

Questions or Sign Maintenance Requests: Should you have questions or concerns about any aspect of this program or should the signs placed adjacent to your residence require service or maintenance, you may contact the office of the Village Administrator by calling 847-965-4100.

APPLICATION FOR INSTALLATION (OR RENEWAL) OF RESERVED ON-STREET PARKING FOR PERSONS WITH DISABILITIES

Please complete this form and attach the required items listed below.

Applicant Information			
Name		Phone Number	
Street Address		City	Zip Code
Location of Requested Reserved Parking Zone			
Street Address		City	Zip Code
Description of Requested Location (exact location, measurements, etc.)			
Person with Disabilities Information			
Name		Age	Applicant's Relationship to Person with Disabilities <i>Answer SELF if applicant is person with disabilities</i>
Driver's License Number	License Plate Number	Make, Model, Year of Vehicle	
Is the person with disabilities a resident of an educational, vocational, or custodial institution or program? ☐ Yes ☐ No If "Yes," attach a letter on official letterhead from the institution or program which states the number of days the person was in residence during the past year (or, alternatively, which lists <u>the dates</u> on which the individual was not in residence).			
Property Information			
Is there on-site parking at the location? ☐ Yes ☐ No		If "Yes," is it accessible to the person with disabilities? ☐ Yes ☐ No	
If "No," explain why the on-site parking cannot be used by the person with disabilities. Additional pages may be used for your explanation.			

The following items must be attached to this application at the time of submittal:

- ☐ Medical Certification Form (**Exhibit A**)
- ☐ Copy of Current Illinois Vehicle Registration Card
- ☐ Copy of Current Illinois Disabled Parking Placard (if vehicle does not have a Disability License Plate)
- ☐ Fee (\$125 for initial application and installation, \$25 for annual renewal - checks payable to **Village of Morton Grove**)

As the owner of the vehicle upon which the person with disabilities named above relies for their primary mode of transportation, I hereby apply for reserved residential parking for the person with disabilities. I certify that this is the only vehicle for which application has been made by the household of said person with disabilities. By affixing my signature to this application, I affirm that the information provided herein is true and correct and that I have read and understand the program's eligibility criteria and the provisions.

Signature of Applicant

Date

Office Use Only

Date Application Submitted

Date Signs Installed

- ☐ Medical Certification Form (**Exhibit A**)
☐ Copy of Current Illinois Vehicle Registration Card
☐ Copy of Current Illinois Disabled Parking Placard (if vehicle does not have a Disability License Plate)
☐ Fee (\$125 for initial application and installation, \$25 for annual renewal)

Building Commissioner Review

I have inspected the premises and found that off-street parking is not available or accessible for the person with disabilities and that on-street parking space is available for a reserved parking place.

Building Commissioner Signature

Date

Public Works Director Review

I have inspected the premises and found that off-street parking is not available or accessible for the person with disabilities and that on-street parking space is available for a reserved parking place.

Public Works Director Signature

Date

Assistant Village Administrator Review

Having reviewed the application, I hereby determine that the application **complies** with Section 5-9-7 of the Municipal Code and **approve** installation of a reserved on-street parking zone adjacent to the residential location specified in this application.

Assistant Village Administrator Signature

Date

Having reviewed the application, I hereby determine that the application **does not comply** with Section 5-9-7 of the Municipal Code and **deny** installation of a reserved on-street parking zone adjacent to the residential location specified in this application.

Assistant Village Administrator Signature

Date

EXHIBIT A
MEDICAL CERTIFICATION OF AMBULATORY DISABILITY FOR
RESERVED ON-STREET PARKING FOR PERSONS WITH DISABILITIES PROGRAM

Please type or clearly print all information.

Person with Disabilities		
Name	Phone Number	
Street Address	City	Zip Code

NOTE TO THE PHYSICIAN: To qualify for a reserved residential parking space, a resident must have a **permanent** disability which sufficiently incapacitates the individual to meet the following definition:

PERSON WITH DISABILITIES: A natural person who, as determined by a licensed physician, by a licensed physician assistant, by a licensed advanced practice registered nurse, or by a licensed physical therapist: (1) cannot walk without the use of, or assistance from, a brace, cane, crutch, another person, prosthetic device, wheelchair, or other assistive device; (2) is restricted by lung disease to such an extent that his or her forced (respiratory) expiratory volume for one second, when measured by spirometry, is less than one liter, or the arterial oxygen tension is less than 60 mm/hg on room air at rest; (3) uses portable oxygen; (4) has a cardiac condition to the extent that the person's functional limitations are classified in severity as Class III or Class IV, according to standards set by the American Heart Association; (5) is severely limited in the person's ability to walk due to an arthritic, neurological, oncological, or orthopedic condition; (6) cannot walk 200 feet without stopping to rest because of one of the above 5 conditions; or (7) is missing a hand or arm or has permanently lost the use of a hand or arm. (625 ILCS 5/1-159.1) (from Ch. 95 1/2, par. 1-159.1)

Please indicate the qualifying impairment, assistive devices necessary (if applicable), and briefly describe the applicant's condition.

Impairment:

- ☐ Cannot walk without use of assistive device
- ☐ Restricted by lung disease to extent described above
- ☐ Uses portable oxygen
- ☐ Has a qualifying cardiac condition
- ☐ Severely limited due to arthritic, neurological oncological, or orthopedic condition
- ☐ Cannot walk 200 feet without stopping to rest due to one of the above conditions
- ☐ Is missing a hand or arm or has permanently lost the use of a hand or arm

Assistive Device Used (if applicable):

- ☐ Brace
- ☐ Cane
- ☐ Crutch
- ☐ Another Person
- ☐ Prosthetic Device
- ☐ Wheelchair
- ☐ Other Assistive Device: _____

Describe Impairing Condition(s):

I hereby certify that the physical condition of the person with disabilities named above is permanent and constitutes him/her as a person with disabilities person as described under 625 ILCS 5/1-159.1 of the Illinois Compiled Statues.

Physician's Certification		
Name	Signature	
Address	License Number	Date

EXHIBIT B
REQUEST FOR VARIATION TO ORDINANCE PROVISIONS FOR
RESERVED ON-STREET PARKING FOR PERSONS WITH DISABILITIES PROGRAM

Please type or clearly print all information.

Section 5-9-7:D.1 of the Morton Grove Municipal Code stipulates that, "No reserved parking space shall be issued to any person if the household or any person therein owns, rents, or has regular use of a private driveway, carport, or garage, that gives access to the dwelling of the person with disabilities, or such other adequate off street parking facilities are available." The provisions of the program further stipulate that seasonal weather conditions such as heavy snows are not sufficient grounds for a variation.

Village Administrator may grant a variance to the requirements of Section 5-9-7 when such variance is necessary to overcome an exceptional physical condition, practical difficulties, or unnecessary hardship which prevent a person with disabilities from accessing their residence as intended by Municipal Code. If the Village Administrator declines to grant a variance, you may request review by the Village's Traffic Safety Commission. The Commission will publicly hear and rule on requests for variances based on criteria set forth in Section 5-9-7:D.7. All decisions of the Traffic Safety Commission with regard to variance requests will be final.

Applicant Information		
Name	Phone Number	
Street Address	City	Zip Code
Location of Requested Reserved Parking Zone		
Street Address	City	Zip Code

I, the applicant, applicant hereby certify that the existing off-street parking at the above address does not give convenient access to the dwelling of the person with disabilities for the following reasons. Provide a detailed justification for the request for variation:

Applicant Signature	Date
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