

Borough of Haledon

PASSAIC COUNTY, NEW JERSEY
INCORPORATED 1908
510 BELMONT AVENUE
HALEDON, NEW JERSEY 07508

ALLAN R. SUSEN, RMC/MMC
MUNICIPAL CLERK

TELEPHONE: 973-595-7766 EXT. 103
FACSIMILE: 973-790-4781

APPLICATION FOR HANDICAPPED PARKING SPACE

All applicants must possess a **Disability Identification card** issued by the **NJ Division of Motor Vehicles**. Please provide a copy of the card with this completed application to the Clerk's office.

Identification Card # _____

1. Date of Application _____

2. Name of Applicant _____

3. Address at which sign is requested _____

4. Is the applicant the operator of the vehicle for which the space is requested?
_____ Yes – Furnish a copy of the applicant's driver's license and vehicle registration and skip question number 5.

_____ No – Space is requested to enable transport of applicant by others.

5. Does the principal transporter of the applicant reside with the applicant?
_____ Yes – Furnish copy of driver's license of the principal transporter and vehicle registration.

_____ No

6. Please explain the circumstances which require the designation of a reserved space.

7. Describe briefly the Preferred Location for the space.

8. Please provide the telephone number(s) at which someone can be contacted if questions regarding this space should arise.

Name _____ Phone _____

Name _____ Phone _____

IF A HANDICAPPED PARKING SPACE IS PLACED AT THIS LOCATION AT YOUR REQUEST, IT WILL NOT BE FOR YOUR EXCLUSIVE USE. ANY VEHICLE WITH HANDICAPPED IDENTIFICATION MAY LEGALLY USE THIS HANDICAPPED SPACE.

Please note: The Borough requests annual verification of all handicap spaces.