



Historic Bristol Borough  
Municipal Building  
250 Pond Street  
Bristol, PA

**Person with Disability  
Parking Application**

**A APPLICANT INFORMATION – LIST NAME AND ADDRESS OF PERSON WITH DISABILITY**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

PA Driver’s License Number: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_

Are You the Owner of the Property? \_\_\_\_\_ Do You Have a Driveway at your Property? \_\_\_\_\_

**ATTACHED: A COPY OF YOUR DRIVER’S LICENSE** Are you the Owner of the vehicle your drive? \_\_\_\_\_

**B AUTOMOBILE INFORMATION – LIST MAKE, MODEL AND PLATE NUMBER**

Make of Vehicle: \_\_\_\_\_ Model of Vehicle: \_\_\_\_\_

Vehicle License Plate Number: \_\_\_\_\_ Are You the Owner/ Principle Operator: \_\_\_\_\_

Do You Have a: Handicapped License Plate \_\_\_\_\_ Permanent Disability Placard/Copy \_\_\_\_\_ Or  
Temporary Disability Placard/Copy \_\_\_\_\_ If Temporary - Date Temporary Placard Expires \_\_\_\_\_

**C CERTIFICATION FROM A HEALTH CARE PROVIDER IN PA – HEALTH CARE PROVIDERS MAY ONLY CERTIFY DISABILITIES WITHIN THEIR SCOPE OF PRACTICE. WARNING: Altering or forging a document issued by the PA Department of Transportation, such as a disabled person parking placard or possessing, using or displaying, such a document knowing it to have been altered, forged or counterfeited, is a misdemeanor of the first degree pursuant to the Vehicle Code, 75Pa.C.S. Section 7122, punishable by a fine of not more than \$10,000 or imprisonment of not more than five years, or both. **NOTE: REFERENCE: Bristol Borough Ordinance 1231, December 11, 2006****

Physician’s Name: \_\_\_\_\_ Contact Number: \_\_\_\_\_

Physician’s Fax Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Address: \_\_\_\_\_  
Street number & name City St Zip

Is Your Disability Permanent or Temporary? \_\_\_\_\_

**ATTACHED: HEALTH CARE PROVIDER’S CERTIFICATION OF DISABILITY**

<p><b>D</b></p> <p><b>NOTARIZATION</b></p> <p>COMMONWEALTH OF PENNSYLVANIA COUNTY OF BUCKS</p> <p>Sworn to and Subscribed before me this _____ day of _____, 2016</p> <p>_____ Notary Public</p>	<p><b>SIGNATURE(S)</b></p> <p>I state that I have read and signed this application after its completion. I affirm the statements made herein are correct.</p> <p><b>Applicant’s Signature</b> _____</p> <p>____/____/____ Date Phone Number</p> <hr/> <p>I affirm I am the owner of the above mentioned property.</p> <p><b>Owner’s Signature</b> _____</p>
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