To Whom It May Concern:

Below is the Application for Accessibility Parking. This form must be filled out by both the requestor and a doctor. Please make sure your application includes the following:

- 1. A clear diagnosis of the disability/condition written by a medical professional.
- 2. Documentation of the disability must be current. (The age of the required documentation also may be dependent upon the nature of the disability and the specific requested accommodation.)
- 3. A statement of the functional impact and limitations of the disability in regards to mobility. If the permit is requested for medical appointments the frequency, location, and duration of the appointments must be cited by the doctor.
- 4. \*A list of recommended parking accommodations with an explanation of its relation to the disability or condition.\*
- 5. Please note parking in an accessible parking space is only permitted with a state issued placard

Please make sure that all of theuieed information above is included in your doctor's letter.

