Richard Bowen, Mayor

Taylor Borough Council

122 UNION STREET TAYLOR, PENNSYLVANIA 18517
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Handicap Sign Application

Name of applicant: _____ / _____
{PRINT} {SIGNATURE}

Address of Applicant: _____

_____

Phone Number of Applicant: (home) _____

(Cell) _____

1) Do you currently have a Doctors note stating the reason you require a Handicap parking spot? YES / NO
{Please include copy with this submittal}

2) Do you currently have a Handicap Plaque from the State of Pennsylvania? YES / NO
{Please include copy with this submittal}

3) Is there a driveway or garage at this location? YES / NO

4) Is there a Handicap ramp located at this location? YES / NO

5) Do you drive & who will be using the sign? _____
_____

6) Do you have a car or is someone going to be dropping you at your home? _____

7) Is there another Handicap sign currently at the location? YES / NO

8) Where would you like the sign to be placed? _____

{Return to: Co:The Mayor Taylor Borough 122 Union Street Taylor, PA. 18517}