

RUSH TOWNSHIP, SCHUYLKILL COUNTY  
COMMONWEALTH OF PENNSYLVANIA

RESOLUTION NO. 2017-15

A RESOLUTION OF RUSH TOWNSHIP APPROVING THE FORM TO BE USED BY RESIDENTS TO APPLY FOR A DISABILITY PARKING SPACE.

WHEREAS, the Rush Township Disability Parking Ordinance states that Rush Township may from time to time develop an application form to be completed by qualified applicants to apply to Rush Township for a disability parking space;

NOW, THEREFORE, be it RESOLVED as follows:

The Application for Person with Disability Parking Space form attached to this Resolution shall be the form qualified applicants must complete pursuant to Section 3 of the Rush Township Disability Parking Ordinance.

RESOLVED this 20 day of July, 2017.

ATTEST:

Kathy E. Collich

RUSH TOWNSHIP  
BOARD OF SUPERVISORS

Sharon E. Gilbert  
Benjamin  
Jedwinne Motroni

**Rush Township**  
**Application for Person with Disability Parking Space**

Check One: New Application \_\_\_\_\_ Renewal Application \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Have you been issued a Person with Disability Plate by the Commonwealth of Pennsylvania? YES \_\_\_\_\_ NO \_\_\_\_\_  
If yes, please provide plate number \_\_\_\_\_

Have you been issued a Person with Disability Parking Placard by the Commonwealth of Pennsylvania? YES \_\_\_\_\_ NO \_\_\_\_\_  
If yes, please provide placard number \_\_\_\_\_

Have you been issued a Severely Disabled Veteran plate by the Commonwealth of Pennsylvania? YES \_\_\_\_\_ NO \_\_\_\_\_  
If yes, please provide plate number \_\_\_\_\_

Have you been issued a Severely Disabled Veteran parking placard by the Commonwealth of Pennsylvania? YES \_\_\_\_\_ NO \_\_\_\_\_  
If yes, please provide placard number \_\_\_\_\_

What is the general nature of your disability? \_\_\_\_\_  
\_\_\_\_\_

Do you have a garage or off-street parking available at your residence? YES \_\_\_ NO \_\_\_

Applicants must comply with Ordinance 196 regarding snow emergency routes.

By signing this Application, the undersigned-applicant is verifying the accuracy of all information and answers provided herein, and makes this verification under penalty that any false information or answers provided herein constitute unsworn falsification to authorities and is punishable pursuant to 18 Pa.C.S.A. §4904.

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
DATE

\*\*\*\*\* For Township Use Only \*\*\*\*\*

Has the Application fee been paid? YES \_\_\_\_\_ NO \_\_\_\_\_

The Application is APPROVED \_\_\_\_\_ DENIED \_\_\_\_\_

\_\_\_\_\_  
RUSH TOWNSHIP

\_\_\_\_\_  
DATE