

CITY OF SEATTLE

Residential Disabled Request Form

INFORMATION:

An area is defined as a "residential request area" if the existing land use is a single-family or multi-family building, including the first floor of the building. This does not include live-work or other multi-use buildings where the lower story of the building is nonresidential. The existing on-street parking regulation must not have general time limits or paid parking but may include areas within Restricted Parking Zones (RPZs). Within these areas the requirements for siting a new space within the public right-of-way are:

ELIGIBILITY REQUIREMENTS:

- Requestor has a valid Washington State-issued disabled permit AND the permit is not for a temporary condition •
- Requestor is a full-time resident of the address where requested
- Requestor is the property owner or has written permission of the property owner/manager to install the space
- Off-street parking is unavailable, or where available is not physically accessible to the requestor with a disabled permit
- There is no existing residential designated space within **100 feet** of the applicant's street property frontage on the same side of the street as requested

DISCLAIMER: Requested location is on a street with 5% slope or less AND the requested space is adjacent to an existing curb ramp, or a driveway that substantially complies with curb ramp design requirements. EXCEPTION - for applicants meeting other criteria above, SDOT will install a space in other locations if the requestor returns signed acknowledgment that the space does not fully comply with accessibility recommendations for a parking space within the ROW.

NAME OF APPLICANT: 1. (Applicant must be person with the disability. A maximum of two (2) spaces are allowed for single-family residences.)

- 2. CONTACT INFORMATION: _____
- 3. ADDRESS:
- DO YOU DRIVE YOURSELF?: _____ 4.
- DO YOU HAVE OFF-STREET PARKING?: 5.

A. IF YES, WHY CAN'T IT BE USED?_____

WASHINGTON STATE DISABLED PERMIT NUMBER & EXPIRATION: 6.

ELIGIBILITY EXCEPTION (if applicable): I acknowledge that this disabled space does not fully comply with accessibility recommendations for a parking space within the right-of-way.

SIGNATURE & DATE

Seattle Municipal Tower 700 5th Avenue Suite 3800 PO Box 34996 Seattle, Washington 98124-4996

Tel (206) 684-ROAD / (206) 684-5000

Hearing Impaired use the Washington Relay Service (7-1-1) www.seattle.gov/transportation