

**AN ORDINANCE ESTABLISHING AND REGULATING HANDICAPPED  
PARKING SPACES WITHIN THE TOWNSHIP**

WHEREAS, the Pennsylvania Motor Vehicle Code, 75 Pa. C.S.A. § 3354 (D) 2, permits local authorities to erect on the highway as close as possible to a place of residence a sign or signs indicating that a parking space is reserved for a vehicle bearing a "handicapped" license plate or placard indicating "handicapped", and

WHEREAS, The Township of Newport desires to establish provisions for those seeking "handicapped" parking spaces;

NOW, THEREFORE, BE AND IT HEREBY ORDAINED BY THE TOWNSHIP OF NEWPORT, as follows:

**SECTION I. RESTRICTED HANDICAPPED RESIDENTIAL PARKING**

Any Township resident who has been issued by the Commonwealth of Pennsylvania a handicapped license plat or placard, or on whose behalf said license plate or placard has been issued, pursuant to Section 1338 of the Motor Vehicle Code, shall be eligible for the installation, in front of said person's residence, of a sign indicating that parking in such space is restricted to those vehicles bearing handicapped license plates or placard, which eligibility shall expire twelve (12) months of the date such sign is installed. Application for such restricted parking sign shall be made to the Chief of Police of the Township.

**SECTION II: APPLICATION FORM AND CONTENT**

Application for a restricted handicapped parking space shall be made on a form provided by the Chief of Police. The application information shall include, but not be limited to, the identity of the handicapped person and said person's place of residence. It shall be accompanied by documentation evidencing issuance of a handicapped plate or placard by the Commonwealth of Pennsylvania.

No permit shall be granted where adequate, handicapped accessible off-street parking is available.

All applicants shall meet at least one (1) of the following requirements:

1. The applicant is wheelchair confined.
2. The person requesting a permit is caring for a person who has severe physical or mental disability.
3. The applicant is unable to walk a distance of fifty (50) feet. (Applicant may be asked to perform this and/or produce documentation verifying this condition)
4. The applicant has severe cardiopulmonary insufficiency requiring the use of ambulatory oxygen.
5. Applicant medical physician certifies, in writing, that the applicant must have a residential handicapped parking space due to a medical condition.

6. The applicant requires the use of prosthetic devices that restricts normal ambulation.

### SECTION III. ANNUAL CERTIFICATION

1. Each renewal period shall be twelve (12) months.
2. Application for renewal must be filed with the Chief of Police no later than thirty (30) days before the date the prior eligibility is due to expires.
3. The Chief of Police will not accept the application for renewal unless it is also accompanied by a sworn document containing the following averments:
  - a. The applicant continues to be disabled.
  - b. The applicant continues to drive an automobile or is being driven by another identified individual because of the applicant's disability.
  - c. The applicant residents at the same address.

### SECTION IV: FEES

The fee for the initial installation of a handicapped sign and post shall be One Hundred Twenty-Five dollars (\$125.00). Annual renewal fee shall be Twenty-Five dollars (\$25.00).

### SECTION V: FAILURE TO FILE COMPLETED APPLICATION

Failure to file a completed initial application or a timely application for renewal shall result in such application being denied. In the event an individual fails to file a completed application for recertification within the time allowed, that is, on an annual basis prior to expiration of the individual's eligibility, the right to such sign shall be forfeited, and the sign shall be removed by the Township.

### SECTION VI: CURRENT SIGNS

All residences currently having a handicapped parking sign in front of the premises shall apply to the Chief of Police within sixty (60) days of the effective date of this ordinance for renewal of their handicapped status. It will be necessary for the applicant to meet all guidelines as set forth herein. Failure to do so will result in the removal of the sign.

### SECTION VII: REMOVAL OF SIGN

In addition to removal of the sign for failure to properly apply for renewal, a handicapped parking sign may be removed after notice to the applicant if, upon investigation, the Township determines that the applicant is not, in fact, handicapped, that the applicant has moved or that the privilege is being abused in a manner inconsistent with its intent. The notice to the individual shall state the reason or reason(s) for the anticipated removal of the sign and shall give the handicapped individual twenty (20) days in which to request a hearing before the Chief of Police or his designee.

## SECTION VIII: APPROVAL

Upon approval thereof, the Chief of Police shall refer to the Township Manager for installation of a handicapped parking sign, all applications for handicapped parking which meet the requirements of this Ordinance.

## SECTION IX: CONSULTATION PROCESS

In any instance where questions exist regarding eligibility for a handicapped parking space, the Chief of Police shall secure the advise of the Township Manager, who, in turn, may request the advise of the Township Solicitor.

## SECTION X: PENALTIES

An individual who submits a false application to the Chief of Police shall, upon conviction thereof, be fine Six Hundred Dollars (\$600.00) and costs, or imprisonment of not more than ninety (90) days, or both. Each false application submitted to the Chief of Police shall constitute a separate offense.

## SECTION XI: REPEALER

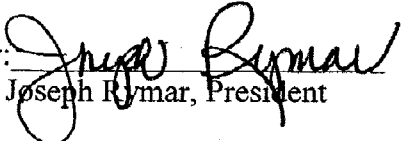
All Ordinances or parts of ordinances in conflict in conflict herewith be and the same are hereby repealed.

## SECTION XII: EFFECTIVE DATE

This Ordinance shall take effect immediately.

DULY ENACTED AND ORDAINED this 4<sup>th</sup> day of October, 2004 in public session dully assembled.

TOWNSHIP OF NEWPORT

By:   
Joseph Rymar, President

Attest:

  
Richard V. Zika, Secretary

**TOWNSHIP OF NEWPORT**

**APPLICATION FOR HANDICAPPED PARKING SPACE PERMIT**

NEW APPLICATION \_\_\_\_\_  
(Fee of \$125.00)

RENEWAL APPLICATION \_\_\_\_\_  
(Fee of \$25.00)

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

PHONE: \_\_\_\_\_

HANDICAPPED LICENSE PLATE #: \_\_\_\_\_

HANDICAPPED PLACARD #: \_\_\_\_\_ EXP. DATE: \_\_\_\_\_

REASON FOR REQUESTING A HANDICAPPED PARKING SPACE PERMIT:

\_\_\_\_\_ APPLICANT IS WHEEL CHAIR CONFINED

\_\_\_\_\_ PERSON REQUESTING PERMIT IS CARING FOR AN INDIVIDUAL WHO HAS A SEVERE PHYSICAL OR MENTAL DISABILITY

\_\_\_\_\_ APPLICANT IS UNABLE TO WALK A DISTANCE OF 50 FEET (APPLICANT MAY BE ASKED TO PERFORM THIS AND/OR PRODUCE DOCUMENTATION VERIFYING THIS CONDITION)

\_\_\_\_\_ APPLICANT HAS SEVERE CARDIOPULMONARY INSUFFICIENCY THAT REQUIRES THE USE OF AMBULATORY OXYGEN.

\_\_\_\_\_ APPLICANT MEDICAL PHYSICIAN CERTIFIES, IN WRITING, THAT THE APPLICANT MUST HAVE A RESIDENTIAL HANDICAPPED PARKING SPACE DUE TO A MEDICAL CONDITION.

\_\_\_\_\_ APPLICANT REQUIRES THE USE OF PROSTHETIC DEVICES THAT RESTRICTS NORMAL AMBULATION.

\_\_\_\_\_  
APPLICANTS SIGNATURE

\_\_\_\_\_  
DATE

APPROVED \_\_\_\_\_

NOT APPROVED \_\_\_\_\_

REASON FOR NOT APPROVED: \_\_\_\_\_

\_\_\_\_\_  
CHIEF OF POLICE

\_\_\_\_\_  
DATE

RECEIVED \$125.00 \_\_\_\_\_

RECEIVED \$25.00

**APPLICANT PLEASE NOTE: BY RECEIVING THIS SIGN, IT DOES NOT MEAN THAT YOU HAVE AN EXCLUSIVE PARKING SPACE. ANYONE WITH A HANDICAPPED PLATE OR PLACARD CAN USE IT.**