



Building Department
12050 Woodward Ave Highland Park, MI 48203
313.252.0050 ext. 209
building@highlandparkmi.gov



HANDICAP SIGN APPLICATION

Address of installation: _____ Date: _____

Applicants Address: _____ City: _____ Zip: _____

Applicants Phone Number: _____ Applicants Email: _____

TYPE OF SIGN: Awning/Canopy Ground Sign Entranceway Projecting Wall Sign

INSTALLATION REQUIREMENTS:

1. Completed Michigan Dept. of State Disability Parking Placard Application.
2. **\$75.00 Permit Fee** - Handicap Sign installation by Department of Public Works.
3. Copy of a valid Driver's License.

ONE SIGN PER PROPERTY ADDRESS

*ON-STREET HANDICAP PARKING SPACES ARE AVAILABLE FOR USE BY ANY INDIVIDUAL DISPLAYING A VALID HANDICAP PARKING PLACARD OR PLATE. *

Signature of Applicant: _____ Printed Name of Applicant: _____

_____ (Initial) I HEREBY ACKNOWLEDGE THAT I HAVE REVIEWED AND FULLY UNDERSTAND THE REQUIREMENTS LISTED ABOVE.

For Office Use Only

Reviewed by: _____ Date: _____

- Approved – Per Code Section #**
- Not Approved** – Reason for Denial: