



CITY OF PHILADELPHIA OFFICE OF ADMINISTRATIVE REVIEW



APPLICATION FOR APPEAL OF DENIAL OF RESERVED RESIDENTIAL ON-STREET PARKING FOR PEOPLE WITH DISABILITIES

* PLEASE PROVIDE THE FOLLOWING DOCUMENTS:

- ☐ THE PHILADELPHIA PARKING AUTHORITY (PPA) DETERMINATION LETTER YOU ARE APPEALING.
- ☐ APPLICANT'S DRIVER'S LICENSE & VEHICLE REGISTRATION ...OR...
- ☐ FOR NON-PRINCIPAL DRIVERS: APPLICANT'S PHOTO ID AND DRIVER'S LICENSE & VEHICLE REGISTRATION FOR THE LICENSED DRIVER THAT RESIDES WITH THE APPLICANT.

APPEALS RECEIVED WITHOUT THESE DOCUMENTS WILL BE RETURNED TO SENDER AS INCOMPLETE.

* APPLICANT'S NAME (First Name, Middle Name, Last Name)		E-MAIL ADDRESS (opt-in for notifications)	
* MAILING ADDRESS		* PHONE NUMBER	
* CITY		* STATE	* ZIP CODE
* PA LICENSE PLATE NUMBER OF THE VEHICLE YOU USE. (Circle the HP, DV or PD designation.) _____ HP / PD / DV	DATE OF PHILA PARKING AUTHORITY LETTER: (You MUST attach the PPA letter to this appeal)	WILL YOU NEED AN INTERPRETER? <input type="checkbox"/> YES / <input type="checkbox"/> NO IF YES, PLEASE SPECIFY LANGUAGE:	

* REASON FOR THIS APPEAL (Be brief and concise. Do not use reverse. If necessary, you may include additional sheets, medical reports etc., with this appeal.)

I HEREBY CERTIFY that the statements contained herein and in any supporting schedule or exhibit are true to the best of my knowledge and belief. I understand that if I knowingly make any false statements herein, I am subject to penalties as prescribed by law.

* APPLICANT'S SIGNATURE	* DATE
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**APPEALS MUST BE RECEIVED WITHIN 30 DAYS OF THE DATE OF THE PPA DETERMINATION LETTER.
APPEALS NOT RECEIVED WITHIN THIS TIME FRAME MAY NOT BE ACCEPTED.**

**YOU WILL RECEIVE AN ACKNOWLEDGEMENT LETTER WHEN YOUR APPEAL IS PROCESSED. THE HEARING
WILL BE SCHEDULED AT LEAST 120 - 180 DAYS AFTER YOU RECEIVE YOUR ACKNOWLEDGEMENT LETTER.
YOU WILL RECEIVE THE HEARING NOTICE 4-6 WEEKS PRIOR TO THE HEARING DATE.**

MAIL / FAX / EMAIL COMPLETED APPEAL TO:

OFFICE OF ADMINISTRATIVE REVIEW
LAND TITLE BUILDING
100 SOUTH BROAD STREET - ROOM 400
PHILADELPHIA, PA 19110-1099
FAX: 215-686-5228 PHONE: 215-686-5216
EMAIL: OAR.DPEMS@PHILA.GOV

OFFICE USE ONLY

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(WEB OBTAINED - 25)