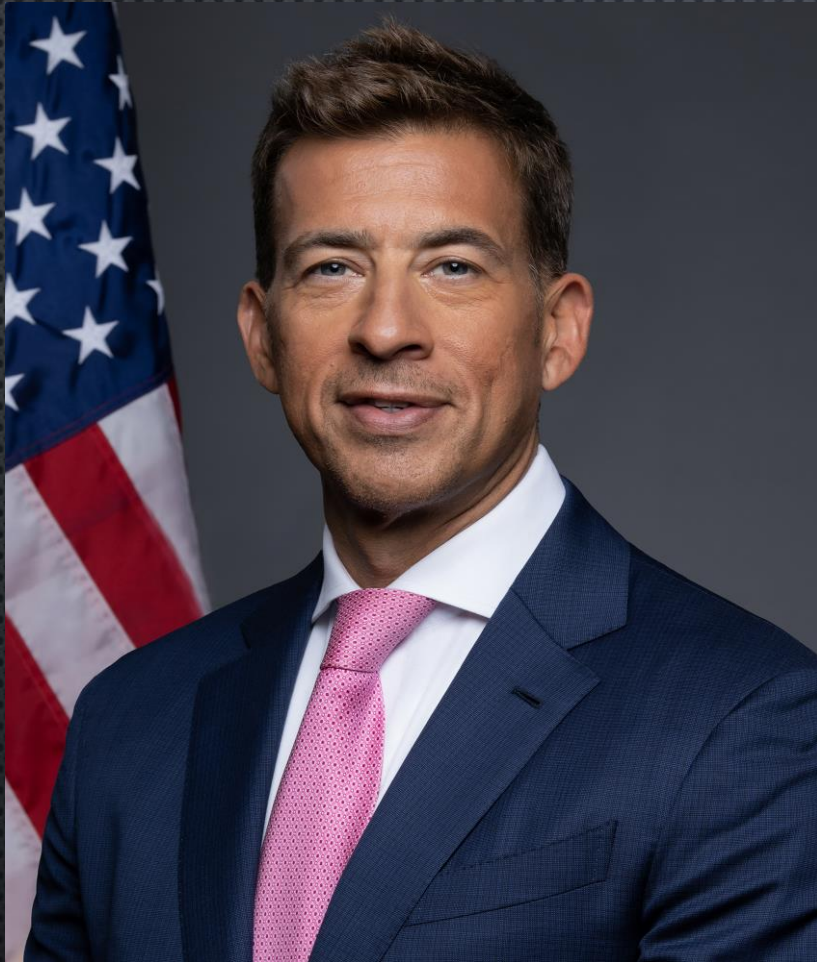




ILLINOIS SECRETARY OF STATE PROGRAMS AND SERVICES FOR PERSONS WITH DISABILITIES



ILLINOIS SECRETARY OF STATE ALEXI GIANNOULIAS

SECRETARY GIANNOULIAS TOURS MACON RESOURCES INC. (



- SECRETARY
GIANNOULIAS GETS A
FIRST-HAND LOOK ON
HOW MRI EMPLOYEES
MAKE ILLINOIS LICENSE
PLATES!
- MRI HAS BEEN MAKING
LICENSE PLATES FOR
ILLINOIS SINCE 1983.
- **ALL EMPLOYEES
WORKING IN THE
PROGRAM EARN A
LIVING WAGE NOT A
SUBMINIMUM WAGE!**
- SECRETARY
GIANNOULIAS
SUPPORTS HB793 TO
END SUBMINIMUM
WAGES IN ILLINOIS!



SECRETARY OF STATE SERVICES

- SKIP THE LINE & MAKE AN APPOINTMENT AT: WWW.ILSOS.GOV. MOST SECRETARY OF STATE DRIVER SERVICES FACILITIES REQUIRE CUSTOMERS TO MAKE AN APPOINTMENT UP TO 10 DAYS IN ADVANCE FOR SERVICES SUCH AS DRIVER'S LICENSE RENEWAL THAT REQUIRES FOR BEHIND-THE-WHEEL ROAD TESTS, ISSUANCE OF REAL IDs, STANDARD DRIVER'S LICENSES, ID CARDS, AND DISABLED ID CARDS.





- THE CHICAGO LIGHTHOUSE PROVIDES APPOINTMENT HELPLINE SERVICES FOR THOSE WHO ARE UNABLE TO USE OUR WEBSITE OR ACCESS A COMPUTER BY CALLING 844-817-4649. THE CHICAGO LIGHTHOUSE'S CALL CENTERS OFFER CAREER OPPORTUNITIES FOR PEOPLE WHO ARE BLIND, VISUALLY IMPAIRED, DISABLED, VETERANS AND ECONOMICALLY DISADVANTAGED INDIVIDUALS.



Effective May 7, 2025, the Federal Government will require your driver's license or ID card to be REAL ID compliant to board a domestic flight or enter a federal building.

To apply for a Real ID card, all applicants must provide proof of identity listing their full legal name, proof of SSN, and two current residency documents.

More information: www.realid.ilsos.gov



YOU DO NOT
NEED A REAL ID
IF:

- You have a valid U.S. Passport or passport card;
- You do not use airplanes as a mode of domestic transportation;
- You do not visit military bases; or
- You do not visit secure federal facilities.
- More information: www.realid.ilsos.gov

ILLINOIS DISABLED IDENTIFICATION CARD

State of Illinois · Secretary of State

Application for an Illinois Person with a Disability Identification Card

To Be Completed By Applicant	I am applying for an Illinois Person with a Disability Identification Card at no fee on the basis that I am an individual who is disabled as defined in Section 4A of the Illinois Identification Card Act. This report shall remain valid for three months.	
	I affirm that the information in this affidavit is true and correct.	
	Applicant's Signature/Date _____	
	Driver's License Number _____ and/or _____	Identification Card Number _____
	Witness _____	Witness _____

Certification for Illinois Person with a Disability Identification Card

Below please indicate the **Priority** of the **Type of Disability** and the corresponding **Classification of Disability** pertaining to the applicant named on this affidavit. Refer to the **Definition Supplement** on the reverse for assistance. (Please mark on the lines provided, any type and classification applicable, in priority order using a 1 to 5 numbering scale.

NOTE to Physician: The numbering scale begins with (1) as the lowest priority and (5) as the highest priority.

Priority:	Disability:	Class:
_____	Physical (P)	_____
_____	Developmental (D)	_____
_____	Visual (V)	_____
_____	Hearing (H)	_____
_____	Mental (M)	_____

I hereby certify that the conditions of the person with disabilities named herein are determined and defined under Chapter 15, Illinois Compiled Statutes, Section 335/4A.

Physician's Signature / Date _____

Physician Assistant's/Advanced Practice Nurse's (APN) Signature / Date _____

(PLEASE PRINT OR TYPE BELOW)

Physician's Name _____

Phone _____

Address _____

Applicant's Name _____

Date _____

Driver's License or ID Number _____

Control Number _____

**MISUSE OF A PERSON WITH A DISABILITY ID CARD
CAN RESULT IN ITS REVOCATION**

*** Please submit this completed form at your local Driver Services facility.**

Definition Supplement

Chapter 15, Illinois Compiled Statutes, Section 335/4A defines:

Types of Disabilities

Type One: Physical (P)

A physical disability is a physical impairment, disease, or loss, which is of a permanent nature, and which substantially limits physical ability or motor skills.

Type Two: Developmental (D)

Developmental disability means a disability that is attributable to: (i) an intellectual disability, cerebral palsy, epilepsy, or autism or (ii) any other condition that results in impairment similar to that caused by an intellectual disability and requires services similar to those required by persons with intellectual disabilities. Such a disability must originate before the age of 18 years, be expected to continue indefinitely, and constitute a substantial handicap.

Type Three: Visual (V)

A visual disability is blindness, and the term "blindness" means central vision acuity of 20/200 or less in the better eye with the use of a correcting lens. An eye that is accompanied by a limitation in the fields of vision so that the widest diameter of the visual field subtends an angle no greater than 20 degrees shall be considered as having a central vision acuity of 20/200 or less.

Type Four: Hearing (H)

A hearing disability is a disability resulting in complete absence of hearing, or hearing that with sound enhancing or magnifying equipment is so impaired as to require the use of sensory input other than hearing as the principal means of receiving spoken language.

Type Five: Mental (M)

A mental disability is a significant impairment of an individual's cognitive, affective, or relational abilities that may require intervention and may be a recognized, medically diagnosable illness or disorder.

Classifications of Disabilities

Class 1

A Class 1 disability is any type of disability which does **not** render a person unable to engage in any substantially gainful activity, or which does not impair the person's ability to live independently or to perform labor or services for which he/she is qualified.

Class 1a

A Class 1a disability is a Class 1 disability which renders a person unable to walk 200 feet or more unassisted by another person or without the aid of a walker, crutches, braces, prosthetic device or a wheelchair, or without great difficulty or discomfort due to the following impairments: neurologic, orthopedic, oncological, respiratory, cardiac, arthritic disorder, blindness, or the loss of function or absence of a limb or limbs.

Class 2

A Class 2 disability is any type of disability which renders a person unable to engage in any substantially gainful activity, or which substantially impairs the person's ability to live independently without supervision or in-home support services, or which substantially impairs the person's ability to perform labor or services for which he/she is qualified or significantly restricts the labor or services which he/she is able to perform.

Class 2a

A Class 2a disability is a Class 2 disability which renders a person unable to walk 200 feet or more unassisted by another person or without the aid of a walker, crutches, braces, prosthetic device or a wheelchair, or without great difficulty or discomfort due to the following impairments: neurologic, orthopedic, oncological, respiratory, cardiac, arthritic disorder, blindness, or the loss of function or absence of a limb or limbs.

Printed by authority of the State of Illinois. July 2020 -- 10M -- DSD X 164.6

HOMEBOUND STATE ID CARD SERVICES

- IS A SERVICE PROVIDED TO PEOPLE WITH DISABILITIES, SENIOR CITIZENS AND BEDRIDDEN INDIVIDUALS WHO ARE UNABLE TO LEAVE THEIR HOMES TO OBTAIN A STATE IDENTIFICATION CARD
- THE STATE IDENTIFICATION CARD MAY BE USED FOR IDENTIFICATION PURPOSES IN THE SAME WAYS AS A STANDARD DRIVER'S LICENSE IS USED FOR IDENTIFICATION
- CERTAIN DOCUMENTS ARE REQUIRED TO OBTAIN THE STATE IDENTIFICATION CARD. SECRETARY OF STATE STAFF WILL DETERMINE ELIGIBILITY AND THE DOCUMENTS REQUIRED
- FOR ASSISTANCE, PLEASE CALL 312-814-3121 OR VISIT WWW.ILSOS.GOV

EMERGENCY CONTACT DATABASE



The Illinois Secretary of State's Emergency Contact Database allows you to enter emergency contact information, as well as disability/special needs information, into a voluntary, secure database at no charge. In the event you are involved in a motor vehicle crash or other emergency where you are unable to communicate, law enforcement can access this information and notify your designated emergency contacts, as well as provide any helpful information to emergency/medical personnel at the scene.

For more information or to join the
EMERGENCY CONTACT DATABASE:

WWW.CYBERDRIVEILLINOIS.COM



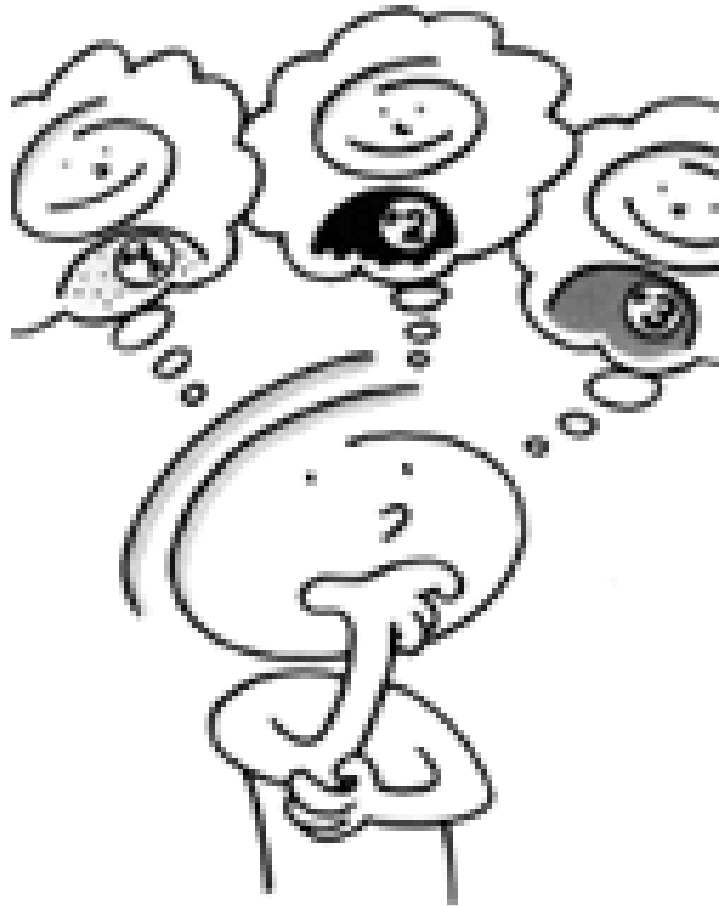
Printed on recycled paper.

Printed by authority of the State of Illinois, April 2014 — 600M — DSD A 222.4

- There is NO FEE to enroll! Anyone who has an Illinois driver's license, Disabled or State Identification card can voluntarily enter their emergency contact information into the database.
- You may select one or two people as emergency contacts. Emergency contact do not need to reside in Illinois. It is your responsibility to notify the individuals you have listed as emergency contacts.
- You may include information or medical issues/conditions including disabilities or drug allergies.
- You may add, modify or delete information at any time at www.ilsos.gov . Any modifications or deletions will overwrite ALL previously information.
- Only law enforcement may access this information and use it only in the case of an emergency when you are unable to communicate with them directly.

ILLINOIS PARKING PROGRAM FOR PERSONS WITH DISABILITIES





HOW TO OBTAIN A PARKING PLACARD AND/OR DISABILITY LICENSE PLATES

All states including Illinois have some type of an application process.

A certification form is required to be completed by a licensed physician or nurse practitioner attesting that the person meets the eligibility requirements of the program.

**The certification form is available at:
www.ilsos.gov**

State of Illinois
Secretary of State
501 S. 2nd Street
Springfield, IL 62756

☐ NEW APPLICANT
☐ RENEWAL

*If your valid placard was lost/stolen/damaged,
use replacement form **VSD 415**,
available online at ilsos.gov
or visit your local Secretary of State facility.

Persons with Disabilities Certification for Parking Placard

*This form is valid for three months from your physician's signature date for a Temporary Placard and six months for a Permanent Placard.

NOTE TO DISABILITY LICENSE PLATE OWNERS: If you have a disability license plate, you **MUST** complete the form and renew your placard.

DIRECTIONS: Both sides of this document must be signed and completed fully. All fields are required. Applicants complete Part 1. If the applicant is a MINOR, then Parent/Guardian(s) **MUST** also complete Part 2. The applicant's medical professional **MUST** complete Part 3. If the applicant is applying for meter-exempt parking, his/her medical professional **MUST** also complete Part 4.

Part 1: Applicant Information (MUST have a valid Illinois driver's license and/or ID card)

I hereby certify that I meet the definition of a person with a disability as provided in 625 ILCS 5/1-159.1, and I certify that my physical condition entitles me to the issuance of a Persons with Disabilities Parking Placard. By affixing my signature below, I understand that the parking placard may not be used unless I am the driver or passenger of the vehicle.

*If a military veteran, please provide a copy of your DD214 showing proof of service.

Full Name of Person with Disability (If Minor, complete Part 2 also.)		Disability Parking Placard # (if any)	
		Male/Female	Date of Birth
Valid Illinois Driver's License or ID Card # of Applicant			
Illinois Address	Apt/Unit #	City	IL ZIP
Mailing Address if Different from Above			
Telephone Number	Email Address	Military Veteran? Yes / No	
Signature of Person with Disability		Today's Date	

Part 2: For Parent or Legal Guardian (MUST have a valid Illinois driver's license and/or ID card)

I hereby certify that the above applicant is a minor and I have primary responsibility for his/her transportation. By affixing my signature below, I understand that the disability placard is issued to the person with disability and may not be used unless I am transporting the disabled person in the vehicle.

Name of Parent or Legal Guardian		Relationship to Person with Disability	
Valid Illinois Driver's License or ID Card #			
Illinois Address	Apt/Unit #	City	IL ZIP
Telephone Number	Email Address		
Signature of Parent or Legal Guardian		Today's Date	

Warning: Any misuse of the disability parking placard/plates or making a false application may result in the revocation of the placard, a 12-month suspension or revocation of your driver's license, and a fine of up to \$1,000.

Temporary Disabled Parking Placard Applications — May be taken to any Secretary of State facility or mailed in.

Permanent Disabled Parking Placard Applications — **MUST** be mailed to the following address:

Secretary of State, Persons with Disabilities Placard Unit, 501 S. 2nd Street, Room 532, Springfield, IL 62756.

*If you have a permanent disability placard and would like a [Persons with Disabilities License Plate](#), please visit your local Secretary of State facility to apply. You will need your permanent placard number and current plate number or VIN.

Please complete Page 2 to ensure timely processing.

Printed by authority of the State of Illinois. December 2022 — 1 — VSD 62.30

Part 3: Medical Eligibility Standards and Medical Professional Certification

As the medical professional(s) executing this document and verifying the nature of the applicant's disability, I understand that making a false representation of a person's disability for the purposes of obtaining any type of disabled parking placard may result in suspension or revocation of my license and a fine of up to \$1,000. As a licensed medical professional authorized pursuant to Section 1-159.1 and 3-616 of the Illinois Vehicle Code, or a licensed optometrist or chiropractor, I certify the applicant has a condition that constitutes him/her as a person with disabilities.

Length of Disability: (Check one)

- ☐ Temporary Disability: the duration of this disability is _____ (maximum 6 months)
☐ Permanent Disability
☐ Meter-Exempt Disability (Must complete and sign Part 4 also.)

Check all that apply: (MUST check at least one):

- ☐ Is restricted by a lung disease to such a degree that the person's forced (respiratory) expiratory volume (FEV) for 1 second, when measured by spirometry, is less than 1 liter.
☐ Uses a portable oxygen device.
☐ Has Class III or Class IV cardiac condition according to the standards set by the American Heart Association.
☐ Cannot walk without the use of or assistance from a wheelchair, a walker, a crutch, a brace, a prosthetic device, or another person.
☐ Is severely limited in the ability to walk due to an arthritic, a neurological, an oncological, or an orthopedic condition.
☐ Cannot walk 200 feet without stopping to rest because of one of the above five conditions.
☐ Amputation of extremity(s) _____
☐ Spina Bifida
☐ Multiple Sclerosis
☐ Quadriplegia/Paraplegia
☐ Cerebral Palsy
☐ Arthritis of the _____
☐ Osteoarthritis of the _____
☐ Chronic Pain due to _____
☐ Legally Blind **with** limited mobility
☐ Pregnancy (third trimester) 90 days maximum

☐ **Diagnosis:** _____
If none of the above conditions apply, list the medical condition that impacts the person's mobility.

Medical Professional's Printed Name	Specialty	
Office Address	City, State, ZIP	
Medical Professional's Signature	State Professional License Number (NOT NPI#)	Today's Date
Signature of Collaborating/ Supervising Physician (if signed above by resident/assistant)		Supervising State Professional License Number

Part 4: Medical Eligibility for Meter-Exempt Parking

The meter-exempt parking certification must be completed only when the applicant qualifies. To qualify, the applicant **MUST have a VALID Illinois driver's license**, have an ambulatory disability described in Part 3, and also have one of the following conditions listed below. **Economic need is not a consideration for meter-exempt parking.**

The applicant is eligible for meter-exempt parking as provided by statute due to the following **PERMANENT** medical condition or disability:

Check all that apply:

- ☐ Cannot manage, manipulate or insert coins, or obtain tickets in parking meters/ticket machines due to lack of fine motor control of BOTH hands.
☐ Cannot reach above his/her head to a height of 42 inches from the ground due to a lack of finger, hand or upper-extremity strength or mobility.
☐ Cannot approach a parking meter due to his/her use of a wheelchair or other device for mobility.
☐ Cannot walk more than 20 feet due to an orthopedic, a neurological, a cardiovascular or a lung condition in which the degree of debilitation is so severe that it almost completely impedes the ability to walk.
☐ Missing a hand(s) or arm(s) or has permanently lost the use of a hand or arm.
☐ Patient is under 18 years of age and incapable of driving.

Medical Professional's Signature	State Professional License Number (NOT NPI#)	Today's Date
Signature of Collaborating/ Supervising Physician (if signed above by resident/assistant)		Supervising State Professional License Number

FOR SECRETARY OF STATE OFFICE USE ONLY

Parking Placard Number: _____ Expiration Date: _____
Issued By: _____ Issue Date: _____

FALSIFYING DISABILITY INFORMATION IS A CRIME

Fraud and abuse of the Parking Program for Persons with Disabilities is a serious problem. Medical professionals can be part of the solution. Falsifying information about the nature of a disability in order to qualify for a disability parking placard and/or license plates is a crime — whether committed by the applicant or the medical professional.

An applicant faces a 12-month suspension of driving privileges, a fine of up to \$2,500 and revocation of parking privileges.

Only individuals with a permanent disability who meet more stringent medical requirements qualify for meter-exempt parking. Medical professionals who certify an application for any patient who does not meet the disability criteria face a Class A misdemeanor, a minimum fine of \$1,000 and possible driver's license suspension.



For more information about the Secretary of State's
Persons with Disabilities Parking Program visit:

WWW.CYBERDRIVEILLINOIS.COM

OFFICE OF THE

ILLINOIS SECRETARY OF STATE

Revised by authority of the State of Illinois, September 2008 — 2008 — 100-000-1

The ARC of Illinois Presentation

To help educate
medical professionals
about the eligibility
requirements to
obtain a placard or
disability plates the
following materials
are available for free.

Parking Program for Persons with Disabilities

A Guide for

Medical Professionals

Changes in the law effective Jan. 1, 2014



The fraudulent use
of disability license
plates and
placards is a
serious problem.
Medical
Professionals can
be part of the
solution!


TYPES OF PLACARDS ISSUED BY SECRETARY OF STATE

REMOVE BEFORE VEHICLE IS IN MOTION
THIS PLACARD IS NOT TRANSFERABLE. IT IS ILLEGAL TO COPY OR DUPLICATE THIS PLACARD.

THE AUTHORIZED HOLDER MUST BE PRESENT AND MUST ENTER OR EXIT THE VEHICLE AT THE TIME THE PARKING PRIVILEGES ARE BEING USED. UNAUTHORIZED USE MAY RESULT IN A \$500 FINE AND SUSPENSION OF DRIVER'S LICENSE AND/OR REVOCATION OF THE PLACARD.

☐ **PERMANENT**

MA 00001




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9	9

EXPIRES THE LAST DAY OF:

JAN	FEB	MAR	APR
MAY	JUN	JUL	AUG
SEP	OCT	NOV	DEC

2024

 **ILLINOIS**
ALEXI GIANNOULIAS
SECRETARY of STATE

Printed by the authority of the State of Illinois | October 2019 - 80M - VSD 8543

REMOVE BEFORE VEHICLE IS IN MOTION
THIS PLACARD IS NOT TRANSFERABLE. IT IS ILLEGAL TO COPY OR DUPLICATE THIS PLACARD.

THE AUTHORIZED HOLDER MUST BE PRESENT AND MUST ENTER OR EXIT THE VEHICLE AT THE TIME THE PARKING PRIVILEGES ARE BEING USED. UNAUTHORIZED USE MAY RESULT IN A \$500 FINE AND SUSPENSION OF DRIVER'S LICENSE AND/OR REVOCATION OF THE PLACARD.

☐ **PERMANENT**

DG90001



0	0
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EXPIRES THE LAST DAY OF:

JAN	FEB	MAR	APR
MAY	JUN	JUL	AUG
SEP	OCT	NOV	DEC

2024

 **ILLINOIS**
ALEXI GIANNOULIAS
SECRETARY of STATE

Printed by the authority of the State of Illinois, April 2023 - 60M - VSD 20019

REMOVE BEFORE VEHICLE IS IN MOTION
THIS PLACARD IS NOT TRANSFERABLE. IT IS ILLEGAL TO COPY OR DUPLICATE THIS PLACARD.

THE AUTHORIZED HOLDER MUST BE PRESENT AND MUST ENTER OR EXIT THE VEHICLE AT THE TIME THE PARKING PRIVILEGES ARE BEING USED. UNAUTHORIZED USE MAY RESULT IN A \$500 FINE AND SUSPENSION OF DRIVER'S LICENSE AND/OR REVOCATION OF THE PLACARD.

☐ **TEMPORARY**

UP 00001



TEMPORARY

EXPIRES THE LAST DAY OF:

JAN	FEB	MAR	APR
MAY	JUN	JUL	AUG
SEP	OCT	NOV	DEC

2024

 **ILLINOIS**
ALEXI GIANNOULIAS
SECRETARY of STATE

Printed by the authority of the State of Illinois, April 2023 - 85M - VSD 39426

REMOVE BEFORE VEHICLE IS IN MOTION
IT IS ILLEGAL TO COPY OR DUPLICATE THIS PLACARD.

THIS PLACARD CANNOT BE USED FOR PERSONAL USE. AN EMPLOYEE OR DESIGNEE FROM THE ASSIGNED ORGANIZATION MUST BE TRANSPORTING PERSONS WITH DISABILITIES WHEN THE PARKING PRIVILEGES ARE BEING USED. UNAUTHORIZED USE MAY RESULT IN A \$500 FINE AND SUSPENSION OF DRIVER'S LICENSE AND/OR REVOCATION OF THE PLACARD.

ORGANIZATION

VV 00001



ORGANIZATION

EXPIRES THE LAST DAY OF:

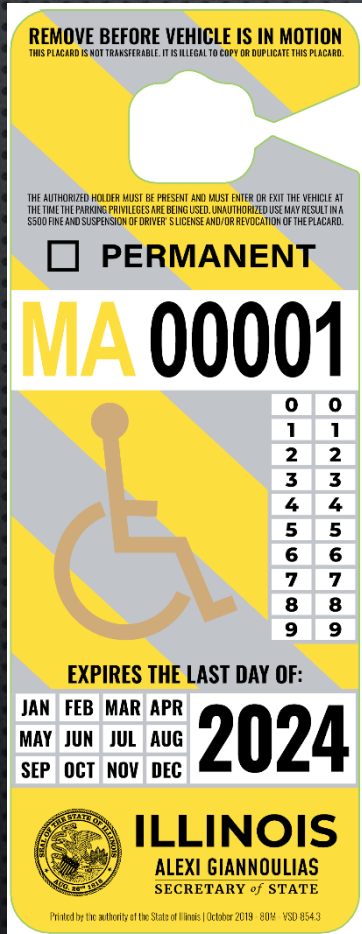
JAN	FEB	MAR	APR
MAY	JUN	JUL	AUG
SEP	OCT	NOV	DEC

2024

 **ILLINOIS**
ALEXI GIANNOULIAS
SECRETARY of STATE

Printed by the authority of the State of Illinois, April 2023 - 10M - VSD -478

METER-EXEMPT PERMANENT PARKING PLACARD



In order to qualify for a meter-exempt placard, a person must have a permanent disability and

- have a valid Illinois driver's license or be under the age of 18 and incapable of driving
- meet a more stringent eligibility criteria attested by a physician

—

NON-METER EXEMPT PERMANENT PARKING PLACARD



- Issued to persons with permanent disabilities.
- Allows the authorized holder to park in Accessible Parking spaces such as at a mall, grocery, or retail store but **DOES NOT** exempt the authorized holder from the payment of parking meter fees and time limitations at parking meters.
- Allows the authorized holder to park in any On-Street Accessible Parking space.

TEMPORARY PLACARDS



- For persons with a temporary disability
- Valid for 6 months or less if issued by the Secretary of State
- Valid for up to 90 days if issued by local townships/municipalities
- Allows the authorized holder to park in spaces reserved for persons with disabilities such as at a mall, grocery, or store but **DOES NOT** exempt the authorized holder from the payment of parking meter fees.

ORGANIZATION PLACARDS



- ISSUED TO NON-PROFIT ORGANIZATIONS THAT TRANSPORT PERSONS WITH DISABILITIES.
- ALLOWS THE AUTHORIZED ORGANIZATION TO PARK IN SPACES RESERVED FOR PERSONS WITH DISABILITIES SUCH AS AT A MALL, GROCERY, OR RETAIL STORE IF THEY ARE LOADING OR UNLOADING DISABLED PASSENGERS BUT **DOES NOT** EXEMPT THE ORGANIZATION FROM THE PAYMENT OF PARKING METER FEES.

DISABILITY LICENSE PLATES

- ISSUED ONLY TO PERSONS WITH A PERMANENT DISABILITY. THEIR NAME MUST BE ON THE VEHICLE TITLE, OR THE PARENT OR LEGAL GUARDIAN OF A MINOR WITH A DISABILITY OR AN IMMEDIATE FAMILY MEMBER RESIDING IN THE SAME HOUSEHOLD.
- ALLOWS THE AUTHORIZED HOLDER TO PARK IN ACCESSIBLE PARKING SPACES SUCH AS AT A MALL, OR RETAIL STORE BUT DOES NOT EXEMPT THE AUTHORIZED HOLDER FROM THE PAYMENT OF PARKING METER FEES AND TIME LIMITATIONS AT PARKING METERS.
- PARKING METER EXEMPTIONS ARE ALLOWED ONLY IF THE MOTOR VEHICLE ALSO DISPLAYS THE APPROPRIATE PARKING PLACARD (YELLOW/GRAY STRIPED) FOR METER EXEMPT PARKING.



THE AUTHORIZED HOLDER

The authorized holder is defined as the qualified person with the disability to whom the placard or disability license plates are issued.

Placards are issued to the authorized holder and not to a vehicle.

The placard can be used in any vehicle that the authorized holder is driving or is a passenger in.

Placards are NOT TRANSFERABLE!



- **IN ILLINOIS, PARKING IN AN ACCESSIBLE SPACE WITHOUT A PARKING PLACARD OR DISABILITY LICENSE PLATE IS A MINIMUM \$250 FINE. (625 ILCS 5/11-1301.3) MUNICIPALITIES CAN INCREASE THE FINE TO \$350 BY ADOPTING A LOCAL ORDINANCE.**
- **PARKING IN THE ACCESS AISLE — VERTICAL LINES ADJACENT TO THE ACCESSIBLE PARKING SPACE IS A \$250 FINE EVEN IF THE VEHICLE IS DISPLAYING A PLACARD OR DISABILITY PLATES.**

UNLAWFUL USE OF PLACARDS OR DISABILITY LICENSE PLATES

- UNLAWFUL USE OF A PLACARD OR LICENSE PLATES IS A VIOLATION OF STATE LAW UNDER ILCS 625 5/11-301.3(A-1) AND IS A \$600 MINIMUM FINE AND A 6-MONTH DRIVER'S LICENSE SUSPENSION.
- POLICE OFFICERS MAY CONFISCATE UNLAWFULLY USED PLACARDS AND RETURN THEM WITH A REPORT AND/OR A COPY OF THE CITATION TO THE SECRETARY OF STATE TO TAKE DRIVER'S LICENSE SANCTIONS AGAINST THE USER. INFORMATION SHOULD BE SENT TO THE SECRETARY OF STATE AT:

PERSONS WITH DISABILITIES
PLACARD/PLATE UNIT

501 SOUTH SECOND STREET, ROOM
541

SPRINGFIELD, IL 62756

How the Public can Report Abuse of the Parking Program for Persons with Disabilities to the Secretary of State



Secretary of State Parking Program for Persons with Disabilities Abuse Complaint Form

Secretary of State
Vehicle Services Department
Special Plates Division
41 W. 162nd St.
South Holland, IL 60473
www.cyberdriveillinois.com

Please complete this form to report alleged misuse or abuse of the Parking Program for Persons with Disabilities. The Secretary of State's office requires the complaint to be based on facts rather than suspicions. Remember that not all disabilities are apparent nor does every individual with a disability use a mobility device such as a cane, walker or wheelchair. Never confront any person you think may be abusing the program. If the situation requires immediate attention, please call your local police department.

If mailing this form, please use the address at left.

Please check applicable box(s):

Misuse/Abuse of:

- ☐ Accessible Parking Spaces
☐ Disability License Plates
☐ Parking Placard

Parking Placard Number (if applicable): _____

Vehicle Illinois License Plates Number: _____

Disability Illinois License Plates Number (if applicable): _____

Date, Time, Location of the misuse/abuse: (address, city/town) _____

Briefly describe why you believe the person(s) is misusing/abusing the Parking Program for Persons with Disabilities:

I hereby state that the information provide herein is true and correct to the best of my knowledge and belief. I submit this complaint as part of my request that the Illinois Secretary of State conduct an investigation based on these facts. I understand that I may be called upon to testify in criminal proceedings as a complaining witness. I also understand that any false statements may be subject to prosecution under perjury, false report or civil statutes. Under penalty of perjury the undersigned swears that the facts contained on this document are within their personal knowledge and are true and correct.

Signature

Printed Name

FOR OFFICE USE ONLY

Name of staff member addressing the complaint: _____ Date: _____

Complaint found to be valid: ☐ Yes ☐ No

Action taken: ☐ Letter to vehicle owner ☐ Letter to disability plate/placard holder

☐ Letter to certifying physician ☐ Revocation of disability plate/placard

ILLINOIS STATE LIBRARY

The Talking Book and Braille Service (TBBS) provides audio and braille library service via mail or digital download to any Illinois resident who is unable to read standard print material due to a permanent or temporary visual or physical disability. **Applications can be found at: www.ilsos.gov**

More than 70,000 digital titles — some in foreign languages — are available, including bestsellers, light fiction, westerns, classics and nonfiction. Over 100 magazine titles are also available, with new titles continually added to the collection.

In Illinois, 11 stations under Illinois Radio Services provide current information from local newspapers. Free closed-band receivers allow patrons to listen to broadcasts of local news, grocery ads and other information not available through the Talking Book Program. For more information, contact the Talking Book and Braille Service or visit ilbph.org for a list of stations.

REGISTER TO VOTE AT ANY SECRETARY OF STATE FACILITY



VOTER REGISTRATION



To register to vote you must:

- 1) Be a Citizen of the United States; and
- 2) Be at least 17 years old on or before the next Primary Election and be at least 18 years old on or before the next General or Consolidated Election.

If you agree to register to vote, your driver's license/identification card application will serve as an application to register to vote. Your application to register to vote will be sent to the Illinois State Board of Elections for the purpose of registering to vote at the residence address indicated on your driver's license or identification card.

Declining to register to vote is confidential and will not affect any services provided by the Secretary of State.

Pursuant to 10 ILCS 5/29-10, submission of a false voter registration application is a Class 3 felony, which is punishable by up to 2-5 years in prison and up to a \$25,000 fine.

Any person convicted of committing perjury on a voter registration application is ineligible for public employment for a period of five years immediately following the completion of his/her sentence. A person who is not a United States Citizen who completes a voter registration application may be subject to deportation and may be refused reentry to the United States.

For additional questions regarding voter registration, please contact the Illinois State Board of Elections at:

217-782-4141
or webmaster@elections.il.gov



PROGRAM & CONTACT INFORMATION

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