



The NWT Council of Persons with Disabilities

Box 1387 (5014-47th Street)
Yellowknife, NT X1A 2P1
Ph: (867) 873-8230 or 1-800-491-8885
Fax: (867) 873-4124

Parking Placard Application Form

Please Note: Applicants must sign off on the Rules Governing the Use of Parking Placards.

Part 1: To Be Completed by the Applicant:

Name: _____

Mailing Address: _____

_____ Postal Code _____

Email Address: _____

Phone: (home) _____ (work) _____

Birth Date: DD ____ MM ____ YY ____ Male Female

Driver's License Number: (If Applicable) _____

My Disability is: _____

To Assist me, I use: Cane, Wheelchair, or _____

Declaration: "I declare that the above information is true and correct".

Signature of Applicant: _____ Date: _____

For Office Use Only

Placard Number: _____ Date Issued(DD/MM/YY) _____

Expiry Date: (DD/MM/YY) _____ Issued By: _____ Previous No: _____