

Medical Application for Binghamton University "L-Permit" Parking

Dear Physician:

Binghamton University provides Disability Parking throughout the center of campus, concentrating spaces in lots affording level pedestrian access to nearby buildings. Individuals who have registered their vehicles appropriately with the University's Parking Services and display valid State Disability Parking Permits may park in designated regular disability parking. In addition, we've designated a limited number of "L-Permit Parking" spaces for drivers whose disabilities limit them to such an extent that traveling from "Regular Disability Parking" to building destinations is too far for them to physically manage.

Your patient has requested authorization to access the limited number of "L-Permit" parking spaces situated closest to the buildings. Please provide us with the following information regarding your patient's disability. We will use this information to engage the "L-Permit" applicant in a discussion of his/her access needs and to make a final determination regarding the appropriate level of disability parking authorization.

PATIENT NAME: _____

Relevant Medical Diagnosis (please be as specific as possible):

Functional Limitations (please be as detailed as possible): _____

Distance patient can walk on flat terrain _____ sloped terrain: _____

Expected Duration of this higher level of disability: _____

When you expect to re-evaluate the individual's disability: _____

Physician Name (please print): _____

Address: _____

Professional License #: _____ Phone #: _____

Signature: _____ Date: _____

Thank you for your assistance.

Sincerely,
B. Jean Fairbairn
B. Jean Fairbairn, Director
Services for Students with Disabilities

2007-2008 Application for L-Permit Campus
Disability Parking Authorization

Please Print

Date: _____

Name: _____

Email Address: _____

Last 4 Digits of Social Security Number: _____

B.U. Campus Address: _____

B.U. Campus Phone: _____

Home Address: _____

Home Phone: _____

Vehicle License Plate Number: _____

Vehicle License Plate Number: _____

Vehicle License Plate Number: _____

Vehicle License Plate Number: _____

Applicant's Signature: _____