



## Instructions for Applying for a Disabled Person's License Plate or Permanent or Temporary Permit (Placard)

Except for signature(s), this application must be typed, electronically completed and printed or legibly printed by hand for signing and submission.

**Note:** Vehicle owner information is only required when applying for a disabled person's license plate. You do not have to own a vehicle to obtain a disabled person's parking permit (placard).

### **Section One**

- \*Record the vehicle owner's full legal name, valid driver's license number and the name of the issuing state **if** applying for a disabled person's license plate.
- \*Record the vehicle owner's street address including the city, state and zip code **if** applying for a disabled person's license plate.
- \*Enter the county name where the vehicle owner resides **if** applying for a disabled person's license plate.
- \*Check the box to indicate the disabled person's relationship to the vehicle owner, e.g. child, self, spouse or ward, **if** applying for a disabled person's license plate.
- Enter the disabled person's full legal name.
- Enter the disabled person's street address including the city, state and zip code.

### **Section Two – For Institutions Only**

For institutions only, enter

- The institution's full legal name
- A description of the vehicle, e.g. vehicle year and make, vehicle identification number, vehicle color and vehicle license plate number
- The institution's authorized agent must sign and enter his/her position or job title with the institution.
- A copy of the institutional license must be attached.

### **Section Three**

- Check the box(s) indicating what you are applying for, e.g. temporary parking permit (placard); permanent parking permit (placard); special permanent parking permit (placard) or disabled person's license plate. You may apply for **both** a disabled person's parking permit (placard) and a disabled person's license plate with this form by checking the applicable boxes.

**Note:** Disabled person's license plates are issued to individuals, not to institutions.

### **Section Four**

The practitioner of the healing arts **must**:

- Check the applicable box to indicate whether the disability is permanent or temporary.
- Check the applicable box to indicate the type of disability.

### **Section Five**

The practitioner of the healing arts **must**:

- Print his/her full legal name, record his/her Georgia license number, sign and enter the date signed.
- Record his/her office street address including the city, state and zip code and his/her business telephone number, including the area code.

**Note:** This form must be completed and signed by a licensed practitioner of the healing arts, as defined by [Georgia Law §40-2-74](#), as amended, and his/her signature must be notarized. In addition to signing, the notary public must affix his/her notary seal or stamp and enter the date his/her notary commission expires.

This application can be electronically completed and printed from our web site, [www.dor.ga.gov](http://www.dor.ga.gov), for signing, notarization and submission to your County Tag Agent.