

DEAF / BLIND / AUTISTIC CHILD WARNING SIGN REQUEST APPLICATION

Residents may request "DEAF CHILD AREA", "BLIND CHILD AREA" or "AUTISTIC CHILD AREA" warning signs adjacent to their property for children under the age of 18 with hearing impairments, vision impairments and/or autism by completing and returning this form to the City in person or via mail to the address listed above. Any questions regarding this application can be directed to the Engineering Division at (623) 876-2974 or engineering@elmirageaz.gov.

The requestor may pursue either of the below sign options: (Check one)







Parent/Legal Guardian Name: _____

Property Address: _____

Contact Phone Number(s): _____ Email: _____

Name of Child: _____ Date of Birth: _____

I certify that the following statements are true:

1. I am the parent/legal guardian of the child.
2. The child is under the age of 18.
3. The property address listed above is the child's permanent and primary residence.

Signature of Applicant _____ Date _____

- **The Engineering Division will review and approve or deny the request. If approved, the signs will be installed at no cost. The exact number of locations of the warning signs will be determined by Engineering staff.**
- **A maximum of one sign will be installed for each direction approaching the residence of the child.**
- **The signs will be removed when the child reaches the age of 18 or when the child no longer resides at the property.**
- **The requestor must contact the City yearly with a statement that the child still resides at the address. If the requestor fails to contact the City, the signs shall be removed.**

For Office Use Only

APPROVED **DENIED**