



people. planning. positive change.



# Parking Permit Application

## Organizations

9:00 a.m. — 4:30 p.m. Monday to Friday

4445 Norfolk Street, Burnaby BC V5G 0A7 Tel: 604-718-7744 permits@sparc.bc.ca

www.sparc.bc.ca

### 1. Organization Information

#### Step 1

Please print clearly & ensure the information provided is complete.

NAME OF ORGANIZATION (If possible, please provide us with your organization's file number)		
MAILING ADDRESS (Apt. No, P.O. Box or RR#)		(Number & Street)
CITY	PROVINCE	POSTAL CODE
TELEPHONE NUMBER ( )		FAX NUMBER ( )
NAME OF BRANCH OFFICE, GROUP HOME OR PROGRAM INVOLVED		
NAME OF PRIMARY CONTACT PERSON		POSITION WITHIN ORGANIZATION
PRIMARY CONTACT'S PHONE NUMBER		PRIMARY CONTACT'S EMAIL ADDRESS

### 2. Important Information to be Attached

#### Step 2

Attachments & your responses on letterhead required.

<ul style="list-style-type: none"> <li>* Please submit required information on your letterhead paper.</li> <li>* Please type and number your responses as follows.</li> </ul>
1. Whenever possible, SPARC BC issues permits directly to the person with a disability for that individual's sole use and responsibility. The permit is portable and can be used in any vehicle that the permit holder is travelling in. <b>Please explain why this arrangement would not be practical for the individual(s) being transported.</b>
2. If the number of people to be transported is <b>10 or less</b> , list their full names and include a short description of their mobility impairment.
3. Otherwise, if the number of people to be transported is <b>greater than 10</b> , provide the approximate number with a <b>general</b> description of their disabilities.
4. List the <b>license plates numbers</b> , model, seating capacity and colour <b>of each vehicle used to transport client(s) with mobility impairment(s)</b> . There should be at least as many vehicle descriptions as there are permits being requested.
5. If your organization's request is for more permits than there are vehicles, please provide an explanation.
6. Please attach a copy of your <b>organization's operating license</b> or <b>annual report</b> with this application.

## About SPARC BC

SPARC BC knows that communities are just and healthy when people have equitable access to places, knowledge, services, adequate incomes, and community decision-making processes. That is why SPARC BC is passionate about working with people on income security, accessibility, and community development issues; and on the connections between them.

As an independent, non-partisan, registered charity working with BC communities for over 43 years, SPARC BC is an excellent source of knowledge and expertise.

We conduct socially focused, evidence-based research; do consulting work and workshops with communities; connect with the public and government through advocacy; and proudly operate the Parking Permit Program for People With Disabilities.

We strongly believe in connecting people to knowledge for positive change so we support the BC Community Accessibility Network (BC CAN) and Community Social Planning Network of BC (CSPN BC), and distribute our research and publications widely.

Consider partnering with us, using our Research and Consulting services, or becoming a SPARC BC Society member. We value your support!

[www.sparc.bc.ca](http://www.sparc.bc.ca)

## 3. Payment Information & Membership Opportunity

ITEMS	PAYMENT
<b>1. Permit Fee</b> <b>\$20.00 X _____ (# of permits)</b>	= \$ _____
<b>2. Become an Organizational Member</b> Help support independent research, accessibility advocacy, and community development work! You will receive timely updates through newsletters and be invited to participate in our campaigns and AGM as a voting member.  Charity registration number# 12168 3916 RR001	= <input type="checkbox"/> \$ <b>60.00</b>
<b>3. SPARC BC Merchandise</b>  Bumper Stickers \$5 x _____ (Select your style below)	= \$ _____
<b>4. Method of Payment (NO CASH PLEASE)</b> <input type="checkbox"/> Cheque <input type="checkbox"/> Money Order (Please make cheques payable to SPARC BC & Allow 2-3 weeks for processing)  Card Number _____  Expiry date: _____/_____/_____  <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard  Signature _____	<p style="text-align: right;"><b>Total:</b></p> = \$ _____

## SPARC BC Merchandise

**Bumper Stickers:** Help alert other motorists of the special needs of drivers with disabilities. We offer five different bumper sticker designs. \$5 each



Qty \_\_\_\_\_



Qty \_\_\_\_\_



Qty \_\_\_\_\_



Qty \_\_\_\_\_



Qty \_\_\_\_\_