

**AFFIDAVIT FOR
DISABLED PARKING AT METER**

Pursuant to Administrative Order No. 99-58, paragraphs 3 and 13, respectively, the Clerk of the Court may administratively dismiss overtime parking citations issued against a disabled permit owner for the following reasons:

Violation of 30-378(a) or 49(20)(a) [meter shows a violation] and 30-378(c) or 49(20)(c) [time on meter expired]

Meter parking complaints issued against vehicles displaying a "DV" license plate, a license plate stamped with the international wheelchair symbol, or a person issued a disabled permit, provided that the person in whose name such license plate or disabled permit is registered furnishes the Clerk's Office with a valid disabled parking permit registration, and an affidavit that he or she was operating the cited vehicle at the time the parking complaint was issued.

Violation of 30-378(b) or 49(20)(b) [meter restricts duration of time, officer indicates 4 hours or less]

Overtime parking tickets issued to an individual whose vehicle bears a valid disabled permit, upon presentation to the Clerk's Office a valid disabled parking permit registration and an affidavit by the permit owner that the citation was issued for parking at an on-street meter for 4 hours or less, and that the permit owner was present at the time of the alleged violation.

I, _____, hereby state that **I am the owner of**

- a disabled license plate number** _____ (DV, or Wheelchair Symbol),
or
 a disabled parking permit number _____

that my Driver's License or State I.D. number is _____,

that parking citation # _____ was issued to me for (check 1 item below)

- a metered parking violation 30-378(a) or (c) or 30-49(20)(a) or (c) and I was operating the vehicle involved at the time the parking complaint was issued.
or
 an overtime parking violation of 30-378(b) or 30-49(20)(b), I was present at the time of the violation, and I was parked for 4 hours or less at an on-street meter and not longer than the maximum time permitted on the meter.

I have provided a copy of my valid disabled permit registration with this affidavit and a photocopy of my driver's license to the Clerk's Office for administrative dismissal of the parking citation noted herein.

Pursuant to Florida Statute 92.525, under penalties of perjury, I declare that I have read the forgoing affidavit and the facts stated in it are true.

(Signature of the owner of disabled permit)

(Print Name)

Date

(Address)

(City) (State) (Zip)

(Area Code) (Phone Number)

Given by: _____, Deputy Clerk

Verified by: _____, Deputy Clerk

Registration Attached

USE ONLY FOR PARKING VIOLATION CODE 1 or 11 (NO FEE)