

Diane M. Beyer
Director of Public Works



City of Fredericksburg
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ACCESSIBLE PARKING SPACE REQUEST

Date: _____

Name of Person Requesting Space: _____

Street Address: _____

Mailing Address (if different): _____

Email: _____

Phone: _____ Alternate Phone: _____

Relationship to Person to Whom DMV Hang Tag or Disabled Registration is Issued (if not self):

(Signage will be posted in front of the above street address unless other information is provided below)

A copy of your DMV issued hang tag or Disabled Registration must accompany your request in order for the accessible space to be installed.

IMPORTANT: The Fredericksburg Public Works Department will send a yearly letter asking for confirmation that signage is still needed. When the resident moves or the signage is no longer needed, the City will remove the signs. *The signage will be removed if the City gets no response from the yearly update letter.*