



Legislation Details (With Text)

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Type: Ordinance **Status:** Passed

File created: 3/25/2009 **In control:** LICENSES COMMITTEE

On agenda: **Final action:** 4/14/2009

Effective date:

Title: An ordinance relating to statements required of individuals seeking to be considered disabled persons when applying for loading zone permits.

Sponsors: ALD. BOHL

Indexes: PERMITS

Attachments: 1. Notice Published on 4-30-09

Date	Ver.	Action By	Action	Result	Tally
3/25/2009	0	COMMON COUNCIL	ASSIGNED TO		
3/31/2009	0	LICENSES COMMITTEE	RECOMMENDED FOR PASSAGE	Pass	3:0
4/14/2009	0	COMMON COUNCIL	PASSED	Pass	14:0
4/23/2009	0	MAYOR	SIGNED		
4/30/2009	0	CITY CLERK	PUBLISHED		

081584

ORIGINAL

ALD. BOHL

An ordinance relating to statements required of individuals seeking to be considered disabled persons when applying for loading zone permits.

101-23.7-1-b am

Current code requires an individual applying for a loading zone permit as a disabled person to submit a statement certifying limited or impaired ability to walk, blindness, visual impairment expected to lead to blindness or vision loss, handicapping employment or other major life activity or disability such as Alzheimer's disease, or brain injury, which compromises problem-solving or reasoning skills. This ordinance amends the statement submission requirement to omit details of the exact nature of the physical or mental ailment which qualifies the applicant as disabled.

The Mayor and Common Council of the City of Milwaukee do ordain as follows:

Part 1. Section 101-23.7-1-b of the code is amended to read:

101-23.7. Loading and Unloading Zone Permits

1. DEFINITIONS. In this section:

b. "Disabled person" means an individual who submits, at the time an original or renewal loading zone permit is applied for, a statement from a physician or chiropractor licensed to practice in any state or a Christian Science practitioner residing in the state of Wisconsin certifying >>the individual meets <<any of the following>>, though specifically omitting any descriptions, list of symptoms, diagnosis or any other details of the exact nature of the individual's physical or mental ailment<<:

..LRB
APPROVED AS TO FORM

Legislative Reference Bureau
Date: _____
IT IS OUR OPINION THAT THE ORDINANCE
IS LEGAL AND ENFORCEABLE

Office of the City Attorney
Date: _____

License Division

LRB 09078-1
ANC:
03/11/09