



BLIND / DEAF CHILD SIGN APPLICATION

Name of Parent / Applicant; _____

Address; _____

City: _____ State: _____

Zip: _____

Email: _____

Phone: _____

Location for placement of Blind or Deaf Child Sign – Advance warning signage to be placed in advance of condition (address). The location(s) will be determined by Traffic Area Technician.

Please explain why you think it is important to **have a sign placed**:

Is this your residence? Yes: _____ No: _____ or Other: _____

Explain: _____

Is the sign request for a child under 13 who is blind or deaf or both? Yes: _____ No: _____

Does the child live at this location at least 50% of the time? Yes: _____ No: _____

Have you requested an accessible sign and space in this city before? Yes: _____ No: _____

If yes – please list the

address: _____

- I attest that a child under 13 lives at this residence who is blind or deaf.
- I understand that the final decision in approving the sign request and placement location rests solely with Public Works – Traffic Engineering Division. We are not required to provide such signs by law.

Signature of Applicant _____ Date _____

**Please send to: City of Colorado Springs – Traffic
Engineering Division**
30 S. Nevada Ave, STE 401, Colorado Springs, CO 80903



City of Colorado Springs Traffic
30 S. Nevada Ave. STE 401
Colorado Springs, CO 80903
Phone: 719-385-6720
Fax: 719-385-5388
<https://coloradosprings.gov>

Usually only one sign type is allowed per household. If child is both blind and deaf, parent may request which sign is preferred. (Deaf Child Area or Blind Child Area)

An approved sign request will require the placement of two signs – one for each direction of travel. Signage will only be placed on those streets receiving a residential or collector street classification

**Please send to: City of Colorado Springs – Traffic
Engineering Division
30 S. Nevada Ave, STE 401, Colorado Springs, CO 80903**