



DEPARTMENT OF PUBLIC WORKS

## CITY OF NEW ORLEANS

Dear Applicant:

The Traffic Engineering Division of the Department of Public Works has received your request for the removal of a handicapped parking zone. In order for us to process your request, the City requires that the attached application be filled out and signed. (It must also be notarized if the property owner does not apply in person).

With the completed application, you must submit the following:

(1) Direct Proof of Ownership

**Send all of the above to:**

Traffic Engineering Division  
Department of Public Works  
City Hall, Room 6W03  
New Orleans, La. 70112

- OR -

**Email to:**

[trafficreviewdpw@nola.gov](mailto:trafficreviewdpw@nola.gov)

Subject: (Zone Address) -  
ADA Zone Removal

Upon receipt of the required documentation, your request shall be addressed in a timely manner, and you shall be apprised of the results.

Sincerely,

*The Department of Public Works*

*Traffic Engineering Division*



DEPARTMENT OF PUBLIC WORKS  
**CITY OF NEW ORLEANS**

**ADA PARKING ZONE REMOVAL APPLICATION**

ADDRESS OF ADA ZONE:

PROPERTY OWNER NAME:

PROPERTY OWNER  
MAILING ADDRESS:

PROPERTY OWNER PHONE:

PROPERTY OWNER E-MAIL:

Approved: \_\_\_\_\_  
(Signature of property owner)