John J. Barthelmes
Commissioner of Safety

# State of New Hampshire
## DEPARTMENT OF SAFETY
## DIVISION OF MOTOR VEHICLES

23 HAZEN DRIVE, CONCORD, NH 03305
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Elizabeth A. Bielecki
Director of Motor Vehicles

# APPLICATION FOR WALKING DISABILITY PRIVILEGES

**(Please see reverse side for Frequently Asked Questions)**

## Section I – Applicant's Information

**This section must be completed and signed by the applicant (the person with the walking disability). If signed by a third party, please attach all approved documentation (guardianship, power of attorney, etc.)**

**Name:** _____ **Date of Birth:** _____
*First* *Middle Initial* *Last*

**Mailing Address:** _____
*Street* *City* *State* *Zip Code*

_____ _____ _____
*Driver License or Non-Driver ID #* *Telephone Number* *E-Mail Address (Optional)*
*(please write "none" if you do not have one)*

**Upon approval of this application you will be issued one of the following. Please make your selection below:**

☐ One (1) Placard **Fee $5.00**

☐ Two (2) placards **Fee $10.00** (If you already have or are applying for Walking Disability plates you are not eligible for 2 placards)

☐ Walking Disability Plates (for first time) & one (1) placard **Fee $13.00 (Permanent walking disability privileges required. Please send a copy of your current registration). For renewals, please see reverse side of this form.**

I, the undersigned applicant, certify under penalty of unsworn falsification pursuant to RSA 641:3, that I am a resident of this State qualified for walking disability privileges pursuant to RSA 261:88.

**Signature of Applicant:** _____ **Date:** _____

## Section II – Medical Provider Information (This section must be completed by your medical provider)

Please **CHECK ONE** of the following:

☐ Please issue a placard for a **TEMPORARY** disability for a period of _____ months (**cannot exceed 6 months**)

☐ Please issue a placard for a **PERMANENT** disability (These placards require periodic renewal/recertification per RSA 261:88.)

Please **CHECK ONE** of the following:

I am a: ☐ Licensed Physician ☐ Podiatrist ☐ Advanced Practice Registered Nurse (ARNP) ☐ Physician's Assistant

Please **CERTIFY** as follows: I certify, under penalty of unsworn falsification pursuant to RSA 641:3, that the person whose name appears above is under my treatment/care and, in my professional opinion, has a walking disability as defined/used under RSA 259:124 and RSA 261:88. RSA 261:88 includes the following criteria:

I. Cannot walk without the use of, or assistance from, a brace, cane, crutch, another person, prosthetic device, wheelchair, or other assistive device; or

II. Is restricted by lung disease to such an extent that the person's forced (respiratory) expiratory volume for one second, when measured by spirometry, is less than 1 liter, or the arterial oxygen tension is less than 60 mm/hg on room air at rest; or

III. Uses portable oxygen; or

IV. Has a cardiac condition to the extent that the person's functional limitations are classified in severity as class 3 or class 4 according to standards set by the American Heart Association; or

V. Is severely limited in the ability to walk due to an arthritic, neurological, orthopedic, or other medically debilitating condition.

***Please print legibly. Original Signature of Medical Provider is required. Signed under penalty of unsworn falsification (see above).***

**Name of Medical Provider:** _____ **Telephone:** _____

**Medical Provider Address:** _____

**Medical Provider Signature:** _____ **Date:** _____

## Section III – Frequently asked questions

- **What if my placard is lost or stolen?**
  *If your placard is lost or stolen please write a letter requesting a replacement. The letter should include your name, date of birth and mailing address, along with a check or money order for $5.00 per placard requested (maximum of 2 placards per individual applicant).*

- **How do I renew my Walking Disability license plates?**
  *To renew your current Walking Disability license plates, please take your vehicle registration to your town clerk's office. You must have a valid placard in order to renew your plates.*

- **May I have 2 placards and a Walking Disability license plate at the same time?**
  *No. Pursuant to RSA 261:88, you may have either 2 placards OR 1 placard and 1 Walking Disability license plate. The only exception to this is Walking Disability motorcycle plates. You may have a Walking Disability motorcycle plate for each motorcycle you have registered.*

- **How do I request a Walking Disability license plate if I already have a placard?**
  *If you would like to request Walking Disability plates and you already have a valid placard you can write a letter requesting Walking Disability plates and send a copy of your current registration along with a check or money order for $8.00.*

- **May I use my placard in any vehicle I travel in?**
  *Placards are assigned to the individual applicants that apply for them, not a specific vehicle. You may use your placard in any vehicle you are traveling in as long as you will be exiting the vehicle when parking in an accessible parking space. The wheelchair symbol on the placard is internationally recognized so if you travel outside of NH you may still use your placard.*

- **Do I have to renew my permanent placard?**
  *Yes. Walking Disability placards for a permanent disability are valid for up to 5 years and have the same expiration date as your driver license or non-driver identification card.*

- **Why is my permanent placard valid for less than 5 years?**
  *The first time you apply for walking disability privileges, the placard will only be valid until the next renewal of your driver license or non-driver identification card, which may be less than 5 years. After that, it will expire every 5 years on the same date as your driver license or non-driver identification card.*

- **Where can I mail my application?**
  *If you would like to apply through the mail you may send your completed application to:*

  *NH Division of Motor Vehicles*
  *Walking Disability Section*
  *23 Hazen Dr.*
  *Concord, NH 03305*

- **May I apply for a placard in person?**
  *Yes. You may bring your completed application to the nearest DMV locations. Please visit our website for hours and locations for each office: http://www.nh.gov/safety/divisions/dmv/locations/index.htm*

- **May I send a friend or relative to pick up my placard?**
  *Yes. Have your friend or relative bring your completed application (make sure you have signed it) along with their license or ID to the nearest DMV location.*