New York State Disability Parking Permit Renewal Form

As per New York State processing guidelines, please be advised that you (disabled person) are required to include a copy of your New State Drivers License or a copy of your New York State Non-Driver ID. For more information about obtaining a New York State Drivers License or New York State Non-Driver identification card, please call the New York State Department of Motor Vehicles at: 718 966-6155 or 212 645-5550.

If you wish to renew your permit, please fill out the form on the reverse with all the information requested. The person with the disability must sign this request for a renewal permit. If the person with the disability is physically unable to sign, then, and only then, a parent, spouse, guardian, or person with power-of-attorney may sign. In that case, an explanation of the circumstances and the relationship of the person signing must be noted on the form. (This permit cannot be transferred to another person who may have a disability. Such a person will need to request his or her own application. Any misrepresentation of facts on this renewal request form or any misuse of the permit may result in the permit being revoked and the issuance of a criminal summons.)

Please return this form to us as soon as possible. If you are still eligible for the permit and we receive your renewal request form promptly, we will be able to process and mail your new permit in time for you to receive it at least 5 business days before your old permit is due to expire.

Please note: If you have moved outside the five boroughs of New York City, we will not be able to renew your New York State disability parking permit. You will need to apply in the city, county, town or village in which you now live.

After completing the following page, please return this form to:

Renewal Request
Parking Permits for People with Disabilities (PPPD)
28-11 Queens Plaza North, 8th Floor
Long Island City, NY 11101-4008

If you have any questions, you may call (718) 433-3100.
New York State Disability Parking Permit Renewal Form

To renew your New York State Disability Parking Permit (Blue Hang Tag), you must fill out this form completely and clearly. Please print or type.

We cannot issue the new permit unless all information requested is filled in. You do not have to visit your doctor again, but we are requesting that you supply us with his or her name and telephone number to update/correct our computer records.

Please enter below all the personal information requested about the person with the disability (the permit holder):

Name: _____________________________ Permit #: __________________________

Address: _____________________________ Apt. #: __________________________

City, State: _____________________________ ZIP __________________________

Telephone(s): Home # (____) ___________ Work # (____) ___________

New York State issued Driver’s License ID# __________________________ Exp. Date __________________________

New York State issued Non-Driver ID# __________________________ Exp. Date __________________________

Social Security#: _______ - _______ - _______ Date of Birth: _______/_____/_______

Doctor’s Name: ___________________________ Dr.’s Tel. # (____) __________

I certify that the above information is true and correct and that the signature below is my own (unless an explanation is given). False statements are punishable under Section 210.45 of the Penal Law.

_________________________ Date _______ / _______ / _______

Signature of Person with the Disability (If another person must sign, please explain why)