

Avec vous,
au cœur de votre sécurité

1 Person with a Disability					
Last name		First name		File number or driver's licence number	
Address (street number, street name, apartment)			Municipality		Province
Postal code	Telephone		(Year-Month-Day)		Sex <input type="checkbox"/> Female <input type="checkbox"/> Male
Date of birth		Licence plate number of the motorcycle, scooter or moped			
Correspondence <input type="checkbox"/> French <input type="checkbox"/> English	Number of your disabled parking permit for general use (if applicable)		Licence plate number of the motorcycle, scooter or moped ¹		
Compensation file number		Date of the accident (Year-Month-Day)		Licence plate number of the motorcycle, scooter or moped ¹ (2nd motorcycle, scooter or moped, if applicable)	

¹ Fees apply for each sticker.

2 Eligibility Criteria
<p>To be eligible for this permit, you must meet the following two conditions:</p> <ul style="list-style-type: none"> • Be the owner or the lessee of a motorcycle, scooter or moped; • Be the holder of a disabled parking permit for general use and a valid accompanying certificate, or be eligible to obtain these documents.

3 Signature of the Person with a Disability
<p>_____</p> <p style="text-align: center;">Signature</p> <p style="text-align: right;">_____</p> <p style="text-align: right;">Date (Year-Month-Day)</p> <ul style="list-style-type: none"> • If you are not the holder of a disabled parking permit for general use, please complete the Disabled Parking Permit Application at saaq.gouv.qc.ca/en/saaq/documents/forms/. • Enclose a cheque or money order made payable to the Société de l'assurance automobile du Québec. For information regarding fees, please visit saaq.gouv.qc.ca. • Allow up to six weeks for processing of the application and notification of a decision by mail. • The parking permit is non-refundable.

Protection of Personal Information
<p>The SAAQ only collects personal information that is necessary for it to exercise its powers and apply the laws it administers. All personal information gathered by authorized personnel is handled confidentially. This information may be shared with our licensing agents and certain government departments or agencies, including those located outside Québec, in accordance with the <i>Act respecting Access to documents held by public bodies and the Protection of personal information</i>. It may also be used for statistical, survey, study, audit or investigative purposes. Failure to provide this information can result in a refusal of service. You may consult, correct or obtain a copy of any personal information concerning you.</p> <p>For more information, consult the Policy on Privacy on the SAAQ's website at saaq.gouv.qc.ca/privacy or contact the SAAQ's call centre.</p>

Vignette de stationnement pour personnes handicapées (act. 6630)
Société de l'assurance automobile du Québec
Case postale 19850, succursale Terminus
Québec (Québec) G1K 8Z4

Toll-free: 1-800-361-7620 (Québec, Canada, United States)
Website: saaq.gouv.qc.ca

If you are unable to print this form, send an email to documentation@saaq.gouv.qc.ca and we will mail you a copy.