



Deaf, Blind, or Deafblind Child Sign Application

Personal Information is collected by the Ministry of Transportation and Infrastructure under section 26(c) of the Freedom of Information and Protection of Privacy Act and will be used for the purpose of processing applications for Deaf, Blind, or Deafblind Child warning signage. If you have any questions about the collection, use and/or disclosure of this information, please contact your local Ministry of Transportation and Infrastructure District Office. Contact info for the Districts can be found using the map and links at this site: <https://www2.gov.bc.ca/gov/content/transportation/transportation-reports-and-reference/regional-district-contacts>

This request is for the placement of Deaf, Blind, or Deafblind Child warning signage by a(n):

- ☐ Parent or Legal Guardian on behalf of an individual (complete Part A & C)
☐ Educational Institution on behalf of an individual (complete Part A & C)
☐ Educational Institution with a permanent Deaf or Blind student program (complete Part B & C)

For a sign or signs with the following message:

- ☐ Deaf Child ☐ Blind Child ☐ Other (For Deafblind Individuals)

PART A for requests on behalf of an individual

I (the Applicant) request the placement of warning signs for the following child. I understand that the effectiveness of these signs as a preventative measure for pedestrian/vehicle collisions is difficult to measure. I understand and accept that these signs will not guarantee safety and that the child should be accompanied and/or supervised.

I agree to notify the BC Ministry of Transportation and Infrastructure (the Ministry) through the local District office should the child move, no longer require use of these signs, or if our contact information changes. I understand that the signs will be removed when the child reaches the age of 18. I also understand that the Ministry may follow up every 5 years to obtain a confirmation of continued sign use.

Child's Name:

Date of Child's 18th Birthday:

PART B for requests on behalf of an institution with a permanent Deaf or Blind student program

I (the Applicant) request the placement of warning signs for the following institution which has a permanent deaf and/or blind student program. I understand that the effectiveness of these signs as a preventative measure for pedestrian/vehicle collisions is difficult to measure. I understand and accept that these signs will not guarantee safety and that children should be accompanied and/or supervised.

I agree to notify the BC Ministry of Transportation and Infrastructure (the Ministry) through the local District office should the institution move, no longer require use of these signs, or if our contact information changes. I also understand that the Ministry may follow up every 5 years to obtain a confirmation of continued sign use.

Institution Name:

PART C for ALL applicants

Location of Residence/Institution where signs are requested

Address:

Municipality or First Nation:

Postal Code:

Primary Contact Phone:

Primary Contact Email:

ACKNOWLEDGMENT: I confirm that the information provided in this document is true and accurate. I acknowledge that I can print and sign this form or sign with a digital signature. If I have digitally signed this form, I agree that my electronic signature is the legally binding equivalent to my handwritten signature. I will not, at any time in the future, disclaim the meaning of my electronic signature or claim that my electronic signature is not legally binding.

Applicant's Signature:

Print Name:

Date:



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PART D for Ministry Staff

Operational Screening

- ☐ Proceed to Traffic Policy and Safety Approval
- ☐ Denied – Unsuitable/Does Not Meet Criteria

Traffic Policy and Safety Approval

- ☐ Approved – District to Install Sign(s)
- ☐ Denied – Unsuitable/Does Not Meet Criteria

Ministry Staff Name:

Ministry Staff Signature: