



Request to Appeal a Parking Citation

Parking Citation Number

Name

Address

Address Line 2

City

State

ZIP Code

Phone Number



Please explain your reason(s) for appeal

I understand the following with respect to appealing this parking citation:

That payment of the fine is due immediately. No appeal request is accepted unless (1) full payment is made on the citation and (2) the request is submitted within 14 days after the citation was issued.

That the officer who issued the citation will not be present at the hearing.

That failure to appear for the scheduled hearing forfeits further appeal on the citation.

That should the citation be dismissed after appeal, reimbursement of the fine will be made by check and mailed to the address you provided above.

Signature