Parking Violation
Appeal Application

ALL APPEALS MUST BE MADE WITHIN 10 DAYS OF THE ISSUANCE OF A VIOLATION TICKET! NO APPEALS ACCEPTED AFTER 10 DAYS!

Name:_____ Date:_____

Address:_____ Date of Violation:_____

_____ Ticket #:_____

Phone #:_____ Parking Permit #:_____ Parking Permit Type:_____

Reason(s) for Appeal:_____

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Signed:_____

COMPLETED FORM IS TO BE RETURNED TO CRITES HALL #012 (SECURITY OFFICE); (308) 432-6037

Date of Appeal:_____

Granted:_____ **Denied:_____**