

# Parking Operations

## Petition for Appeal of Parking Violation Ticket

TO: The Parking Appeals Board

SUBJECT: PETITION FOR APPEAL OF A PARKING VIOLATION TICKET

FROM: Name (Print) \_\_\_\_\_ Ticket # \_\_\_\_\_  
Address \_\_\_\_\_ Date Issued \_\_\_\_\_  
City, State, Zip \_\_\_\_\_ Violation \_\_\_\_\_  
Email \_\_\_\_\_ Violation Number \_\_\_\_\_  
Telephone \_\_\_\_\_ Location \_\_\_\_\_  
Date \_\_\_\_\_ Make of Vehicle \_\_\_\_\_  
Signature \_\_\_\_\_ Vehicle License # \_\_\_\_\_

### IMPORTANT

- Any person who desires to appeal a violation penalty must appeal it within ten (10) calendar days of the ticket's issuance. The parking violation must also be paid prior to filing an appeal and only after receipt of payment, may a violation be elevated to the appeals board committee for review of a no violation penalty in accordance with Sections 6 and 7 of the Parking Violations and Appeals regulations. **Tickets over ten (10) days of issue are not eligible for appeal**
- It is the responsibility of the student, who desires to appeal a violation penalty and is unable to pay the violation penalty fee required to file the appeal, to request and receive approval and signature from the Dean of Students (or designee) on this form within ten (10) calendar days of the ticket's issuance.

I authorize this petition for appeal of a parking violation to be filed *without payment of the parking violation penalty fee* as required by Sections 6 and 7 of the Parking Violations and Appeals regulations.

\_\_\_\_\_  
Signature of Dean of Students or designee name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print name – Dean of Students or designee name

COMPLETE AND RETURN THIS FORM TO: UIS Parking Operations  
University of Illinois Springfield  
One University Plaza, MS BSB 43  
Springfield, IL 62703-5407

REASON FOR APPEAL: (If additional space is needed, continue on back)

Do you desire to make a personal appearance at the time your appeal is considered?  Yes  No

You will be notified by mail or email as to the disposition of your appeal.

..... **FOR OFFICE USE ONLY** .....

Date Appeal Received \_\_\_\_\_ Disposition: \_\_\_\_\_ Appeal Approved

Date Appeal Considered \_\_\_\_\_ \_\_\_\_\_ Appeal Denied