

# Parking Operations

## Petition for Appeal of Parking Violation Ticket

Name (Print) \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Email \_\_\_\_\_  
Telephone \_\_\_\_\_

Ticket # \_\_\_\_\_  
Date Issued \_\_\_\_\_

Signature \_\_\_\_\_  
Date \_\_\_\_\_

### REQUIREMENTS FOR APPEAL

**Failure to complete any of these requirements will make the appeal ineligible for presentation to the parking appeals board.**

- 1) An appeal must be filed within ten (10) calendar days of the ticket's issuance. **Tickets over ten (10) days of issue are not eligible for appeal.**
- 2) The parking violation **must be paid prior to filing an appeal.** If you are a student and unable to pay the violation, prior to completing Step 3 below, you must request and receive approval from the Dean of Students (or designee) in the Waiver section of this form. To request approval from the Dean of Students, email your completed form to deanofstudents@uis.edu. When you receive the signed form from the Dean of Students, complete Step 3 below.

**3) APPEAL FORM MUST BE EMAILED, MAILED, OR HAND-DELIVERED TO PARKING OPERATIONS:**

Email: parking@uis.edu

Mail: UIS Parking Operations  
University of Illinois Springfield  
One University Plaza, MS BSB 43  
Springfield, IL 62703-5407

Location: Business Services Building 43  
217-206-8502

### WAIVER

**I authorize this petition for appeal of a parking violation to be filed *without payment of the parking violation penalty fee.***

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

\_\_\_\_\_  
Date

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

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