



**PARKING AND TRAFFIC APPEAL FORM**

**PLEASE READ BEFORE RETURNING THE FORM TO THE AUXILIARY SERVICES/PARKING AND TRANSPORTATION OFFICE.**

**Please attach all citations to appeal.**

**Appeals will NOT be considered for the following reasons:**

- **Fire lane violation**
- **Not knowing or lack of knowledge of Parking Regulations**
- **Inability to find a proper convenient parking space**
- **Financial hardship caused by the fine**
- **Someone else driving your car**

If you are appealing for reasons i.e. (disabled vehicle or temporary medical problem) other than those listed above, you may complete the form. To support your appeal, you must provide documentation (i.e., repair bill, doctor's note, police report, etc.). Complete the form in as much detail as possible and return it to the Auxiliary Services/Parking and Transportation Office (located in the Warwick Center) within 7 days. The committee will review polices and documentation associated with the violation and consider any extenuating circumstance you describe.

Name: \_\_\_\_\_ ID #: \_\_\_\_\_

UNCW P.O. BOX: \_\_\_\_\_ Date(s): \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ "G/O ckn" \_\_\_\_\_

(Local/Box, City, State, Zip) ←↓ **MUST HAVE THIS INFORMATION FOR RESPONSE.**

Citation Number(s): \_\_\_\_\_ Date(s): \_\_\_\_\_ Time(s): \_\_\_\_\_

Location: \_\_\_\_\_

Provide a complete description of the detail of your case.

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I affirm that this information is true and correct.

Signature: \_\_\_\_\_

Actions taken by the Appeals Committee: \_\_\_\_\_ Denied: \_\_\_\_\_ Approved: \_\_\_\_\_

Comments:

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