Traffic Appeals

Type of Tr	affic Appeal:	Ї•One			
Written	Verbal	Faculty/Staff	Law Sch	ool	
					Today's Date:
Name:				Phone Number:	(circle one) Cell/Home/Work
E-mail Addre	ess:		(method by which yo	ou will be notified of the disposition)
ID #:					
Ticket #: (attach to this form): Parking Decal #:					
Vehicle Infor	mation:				
License Plate#: State of Registration:					
Parking State	us: Select One				
[] Gateway	/ [] Com	monwealth/LaRiviere/P	Plymouth [] Quad/Windhar	m [] Evergreen
[] Southw	rood [C]om	nmuter [] Facu	lty/Staff		
	bmitted the citation of the ci	on and a typed/written s	statement?	(Statements may b	e handwritten on the back of this
Have you be	en advised of the	e date, time, location of	your appeal?	(Will be listed on C	onnect2U) [] Yes [] No
		Do Not W	/rite Below This	Line- OFFICIAL L	JSE ONLY
Prior Violation	ons:				
Date Review	/ed:/	/ Decision: [] Res p nsible	[] Not Respo	nsible [] Partially Responsible
Fine:		_ [] To be assess	sed []Tob	e credited	
Notes:					

Written Statement Note: If illegible, the appeal it subject to be denied

	Do not write below this line- OFFICIAL USE ONLY	
Reason for disposition:		
Reviewed by:		