PARKING CITATION APPEAL FORM

Pueblo Community College Public Safety and the Student Center Administration have developed this form for you to appeal a parking citation. Your appeal must be submitted in writing and received by the Student Center Administration within **seven (7) business days** of issuance of citation. After **seven (7) business days** the appeal will not be accepted.

The citation and Parking Citation Appeal Request will be reviewed by the Student Center Administration Office for accuracy and completeness. Both items will then be sent to the Parking Committee for review. Your statement should contain clear and concise information so the Parking Committee can fairly evaluate your appeal. The Parking Committee meets once a month for appeal reviews and the determination will be mailed to you after the hearing. **The decision of the Parking Committee is final.**

**PARKING CITATION APPEAL INFORMATION**

Today’s Date: _________________ Date and Ticket#: ___________________

Student/Faculty S# Number: ____________________________________________

Full Name: __________________________________________________________

Address: _____________________________________________________________

City, State, Zip: ______________________________________________________

(______)____________________ (______)____________________

(Home Phone) (Work Phone)

Student [ ] Faculty/Staff [ ] Visitor [ ]

Reason for appeal: ____________________________________________________
____________________________________________________________________
____________________________________________________________________

Public Safety Department Room 152
Student Center Room 249
900 West Orman Avenue
Pueblo, CO 81004
STUDENT CENTER ADMINISTRATION REVIEW

Appeal Form Turned In To: ___________________________ Received Date: ________________

Reviewed By: ______________________________________

Appeal Form: [ ] Submitted Within 7 Business Days of Citation

[ ] Form Complete and Signed

[ ] Citation Attached

[ ] Accepted/Forwarded for Review [ ] Not Accepted

[ ] Dismiss

TICKET APPEALS COMMITTEE REVIEW

Appeal Approved: Appeal Denied:

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[ ] Citation Dismissed

[ ] Citation Valid

[ ] Citation Reduced Fine Amount$: ________________

Comments:__________________________________________

__________________________________________________

__________________________________________________

Parking Citation Appeal Notes

Permit Issued [ ] Permit Number: ______________________

Previous Citation(s): __________________________________

Comments:__________________________________________

Result of Appeal Mailed [ ] Date: ______________________