



TOWN OF WEST NEWBURY PARKING CLERK

381 Main Street, West Newbury, MA 01985
Phone 978-363-1100 X113

PARKING TICKET APPEAL FORM

TICKET INFORMATION

TICKET #: _____ (ON ENVELOPE) DATE OF ISSUE: _____ TIME ISSUED: _____

TYPE OF VIOLATION: _____ LOCATION OF VIOLATION: _____

INITIALS OR NUMBER OF ISSUING OFFICER: _____ PENALTY: _____

VEHICLE INFORMATION

REGISTRATION #: _____ STATE OF REGISTRATION: _____

VEHICLE MAKE: _____ TYPE: _____ COLOR: _____

REGISTERED OWNER'S NAME: _____

(OPERATOR INFORMATION IF VEHICLE IS A RENTAL/LEASE)

ADDRESS: _____ CITY: _____

STATE: _____ ZIP CODE: _____ TELEPHONE: _____

REASON FOR APPEAL

OPERATOR'S SIGNATURE

DATE

YOUR APPEAL WILL BE REVIEWED WITHIN TEN (10) DAYS. FOLLOWING THE REVIEW, A DECISION WILL BE FORWARDED TO THE ADDRESS GIVEN ABOVE. YOUR FINE WILL NOT INCREASE DURING THE APPEAL PERIOD.

FOR OFFICE USE ONLY

☐ DENIED

APPROVED BY

☐ GRANTED

DATE