

# **CITATION APPEAL**

#### Petitioner Information (Please Print)

Name:					
Mailing Address:	 Affiliation with UNIVERSITY OF NORTHERN COLORADO:				
	 	Student	Bear Number:		
Email:	 	Faculty/Staff	Bear Number:		
Phone:	 	Visitor			

## **Petitioner Statement**

Explain the basis of your appeal for the citation(s) issued being careful to include important facts behind the circumstances of the citation(s). This written statement will be used in the case you are unable to or choose not to meet with our appeals officer in person. Use the back of this sheet if needed.

### Availability

Use the line below to list several dates and times during the hours of 8am – 4pm, Monday – Friday of which you are available to meet with the appeals officer. If you would like your appeal to be heard on your written statement alone, please state this.

#### APPEAL AGREEMENT

An appeal to a citation must be made within the first ten (10) calendar days of a citations' issuance. A petitioner has the option to meet with the Appeals Officer in person without legal representation or by giving a written statement alone. The petitioner is responsible for checking email and/or phone messages to confirm an appointment time based on the hours of availability they provided. If the petitioner fails to arrange an appeal date within 7 calendar days from when the appointment request was made, fails to appear at the time of their scheduled appointment, or does not provide a minimum of a 2-hour notice for cancellation, the appeal will be judged on the provided written submission alone. No appointment reminder will be given. If the petitioner fails to appear at the time of their scheduled appointment reminder will be given. If the petitioner fails to appear at the time of their scheduled appointment, the appeal will be judged on the provided written submission alone. The Appeals Officer's decision is final – any and all fees assessed will be upheld. Should the citation be upheld, be it at the full or a reduced price.

#### PETITIONER AGREEMENT

BY SIGNING BELOW I am requesting a written appeal on the parking citation(s) listed on this form. I have read and understand the appeal agreement above.

SIGNATURE DATE						Office Use Appeal Date Time			
Citation Number (Staff, please make copy of citation and attach)	Citation Date	Violation Code	Fine Amount	Photos Attached	Permit Info Attached	Upheld Code	Dismissed Code	Updated	Letter Sent