

# University of Michigan Parking Citation Appeal

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## Parking Appeals Process

1. Complete all sections of this form and submit it **within 14 days of the date citation was issued.** Please note fine amounts increase after fourteen (14) days.
2. Write your appeal providing concise and complete information (include map, drawings or pictures, if desired). Evidence of a medical emergency or mechanical failure must be provided if this is the basis of your appeal. Additional pages may be added if necessary.
3. Include a copy of the citation.
4. **Send** completed form and supporting documentation to: **City of Ann Arbor  
Violations Bureau  
PO Box 8647  
Ann Arbor, MI 48107-8647**
5. Notification of the Parking Referee's decision will be sent to you at the address you provide below via US Mail.

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(Please print)

**Name:** \_\_\_\_\_

**Today's Date:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Citation Number:** \_\_\_\_\_

\_\_\_\_\_

**Daytime Phone #:** \_\_\_\_\_

**City:** \_\_\_\_\_ **ST** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**License Plate #/ST:** \_\_\_\_\_

**Circle status:** Faculty/Staff Student Visitor Other \_\_\_\_\_

**Permit Number:** \_\_\_\_\_  
(if applicable)

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**Appeal Explanation:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

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## Parking Referee Section

Decision:      Dismissed                      Valid                      Date: \_\_\_\_\_                      Initial: \_\_\_\_\_

Comment: \_\_\_\_\_