# CCSU Parking Appeals Committee

## Parking Appeal Form

**ITEM I - PERSONAL INFORMATION:**

<table>
<thead>
<tr>
<th>Field</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>University ID Number</td>
<td></td>
</tr>
<tr>
<td>Name</td>
<td></td>
</tr>
<tr>
<td>Mailing Address</td>
<td></td>
</tr>
<tr>
<td>City</td>
<td></td>
</tr>
<tr>
<td>State / Zip</td>
<td></td>
</tr>
<tr>
<td>Phone (8 a.m. - 4 p.m.)</td>
<td></td>
</tr>
<tr>
<td>Email</td>
<td></td>
</tr>
<tr>
<td>Student, Faculty/Staff, Visitor/Other</td>
<td></td>
</tr>
</tbody>
</table>

**ITEM 2-VEHICLE AND VIOLATION INFORMATION:**

<table>
<thead>
<tr>
<th>Field</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ticket Number(s)</td>
<td></td>
</tr>
<tr>
<td>Ticket Date(s)</td>
<td></td>
</tr>
<tr>
<td>License Plate State/Number</td>
<td></td>
</tr>
<tr>
<td>Year/Make/Model</td>
<td></td>
</tr>
<tr>
<td>University Parking Decal or Tag Number</td>
<td></td>
</tr>
</tbody>
</table>

**ITEM 3 - SUBMIT THE FOLLOWING FACTS IN SUPPORT OF THIS APPEAL:**

(Please note that appeal should be based on the premise that the ticket was not consistent with university parking rules and regulations. Refer to the back of this form for a list of insufficient grounds for the acceptance of an appeal. If you need more space, please use a sheet of paper and attach it to the back of this form.)

Date: __________

Signature: __________

My signature is verification that I am the person in Item 1 - PERSONAL INFORMATION above, and my supporting statement is true and accurate.

**APPEAL BOARD DECISION:**

- **Appeal Accepted - Amount to be Refunded:** $ __________
- **Appeal NOT Accepted:**
- **Appeal Partially Accepted, Partially Denied - Amount to be refunded:** $ __________

**Comments by the Committee**

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

For the Committee

Initials: __________

Date: __________

Return completed Form AND PAYMENT RECEIPT to: Chair - Parking Appeals Committee, c/o CCSU Police Department, 1615 Stanley Street, New Britain, CT 06050

Telephone: (860.832.2384) Fax (860.832.2379)

Two-part form, please do not separate.
All initial requests for appeals of parking citations will be made in writing.

Tickets must be paid BEFORE an appeal will be considered!!! Tickets must be paid in full (Cashier's Office) within ten calendar days from the date of the ticket. Attach receipt for payment and the ticket to the appeal form and send via inter-office mail, regular mail OR drop off at the CCSU Police Department. Keep copies.

All information on the Appeal Form must be completed for the appeal to be processed.

The Appeal Decision will be indicated on the front of this form and returned to you by mail. Therefore, it is important that all information, including your name and address, be legible. If the information required on the form is not legible, the form will be returned to you without a decision. If your name and address are not legible, it will not even be possible for us to contact you.

The appeals committee shall meet, consider and decide the appeal on the basis of the information provided on the appeal form. The appellant may, in addition, appear and present his/her case in person. Appellants shall be notified by mail at least 10 days in advance of the date, time and place of the Committee meeting.

The appeals committee is a committee of the Faculty Senate. Appeal decisions shall be by vote of the Committee members present and voting. Notification of the Committee's decision shall be by mail and are final.

False or misleading statements or failure to disclose pertinent information will result in denial of appeal. It may also result in the loss of special permit privileges and/or other appropriate administrative action (in the case of students, referral to Student Judicial Board).

The following are insufficient grounds for granting an appeal of a parking citation:

- Being late or in a hurry.
- Dropping something or someone off or picking them up.
- Preferred parking lot full or too far away.
- Inclement weather.
- Others parked in the same way did not receive tickets.
- The amount of time the vehicle was parked.
- I can't afford the ticket.
- I didn't know/ I thought something else/Nobody told me.

The owner of the vehicle was not driving at the time. (The registered owner of the vehicle is responsible for all tickets incurred regardless as to whether that individual was the one who actually parked the vehicle improperly or not.)

Appeals relate to the imposition of parking fines only. If your car was towed as well you need to demonstrate to the Police Department that your vehicle was improperly towed. Contact 860.832.2353.

Please direct all inquiries regarding the status of your appeal to: Telephone 860.832.2384

Return completed form to: Chair - Parking Ticket Appeal Committee c/o CCSU Police Department, 1615 Stanley Street, New Britain, Connecticut 06050 m THANK YOU for your cooperation.

Appeals relate to the imposition of parking fines only. If your car was towed as well you need to demonstrate to the Police Department that your vehicle was improperly towed. Contact 860.832.2353.

Important: This appeal form is for CCSU Parking Tickets only and may NOT be used for City of New Britain parking tickets, traffic tickets or summonses (e.g. a stop sign violation).

Two-part form, please do not separate.

8/15/2005