

KENNEBUNK POLICE DEPARTMENT

4 SUMMER STREET
KENNEBUNK, ME 04043
207-985-6121

PARKING TICKET APPEAL FORM

(Please Print All Requested Information)

PARKING 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: _____ MODEL: _____ COLOR: _____

REGISTERED OWNER'S NAME: _____
(Operator's name and mailing address if vehicle is a rental/lease)

ADDRESS: _____
CITY: _____
STATE: _____ ZIP CODE: _____
TELEPHONE: _____ CELL PHONE: _____

REASON FOR APPEAL (Please Print Clearly):

(Use Reverse Side if Necessary)

If you have a Kennebunk Beach Parking Permit: PERMIT #: _____ TYPE: _____
If practicable, please attach photocopy or proof of permit.

Operator's Signature

Date

Appeals must be received no later than 14 days after the issue date. Your appeal will be reviewed within ten (10) business days. Following review, a decision will be forwarded to the address you have provided above. The fine for this violation will not increase during the review period.

FOR OFFICE USE ONLY

DENIED

GRANTED

Reviewed by

Date