

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: _____ TYPE: _____ COLOR: _____

REGISTERED OWNER'S NAME: _____
[OPERATOR INFORMATION IF VEHICLE IS A RENTAL/LEASE]

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

REASON FOR APPEAL (Please Print Clearly): _____

(Use Reverse Side if Necessary)

OPERATOR'S SIGNATURE 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