



Parking Citation Appeal Form

Office of the Bursar
 Parking Services
 PO Box 757640
 Fairbanks, AK 99775
 (907) 474-7384

Attach your copy of the citation to this appeal. Use a separate appeal for each citation.

Citation Number	Citation Date:	License Plate #:	State:	Today's Date:
Name:			Please indicate your primary University affiliation.	
Mailing Address:			<input type="checkbox"/> Student <input type="checkbox"/> Staff <input type="checkbox"/> Faculty <input type="checkbox"/> Visitor <input type="checkbox"/> Other	
City:	State:	Zip Code:		
e-mail address:		Phone #		

Instructions: All persons receiving a citation have the right to appeal within 14 calendar days from the date of citation. Appeals received after 14 calendar days will not be eligible for review and all appeal rights will be forfeited. To file an appeal, complete this form and submit the original and yellow copy of the form to Parking Services, Signers' Hall First floor.

(Please do not write below this line)

 By my signature I certify the foregoing statements are correct