CITATION APPEAL FORM

*PRINT LEGIBLY ALL REQUIRED INFORMATION OR PETITION WILL NOT BE ACCEPTED

*Name: __________________________________ *Date of Citation: ___/___/___

*Address: __________________________________ *Phone No.: __________________

*City: __________________ *State: _____ *Zip: __________________

*Email: __________________________________ *Citation #: __________________

*Vehicle Make:____________________ * Vehicle License: __________________ * State: _______

*Check Applicable Box

☐*Student ID_________________ ☐*Employee ID _____________

☐*Visitor- Government Issued ID/Type ___________________ *State ____________

* Reason for Petition:
_________________________________________________________
_________________________________________________________
_________________________________________________________

Officer’s Statement:
_________________________________________________________
_________________________________________________________
_________________________________________________________

This form is to be filled out and given to the Public Safety Department. Appeals must be filed within 14 calendar days of the citation date. Citation Review Committee meetings are held on the first Wednesday of each month. Petitioners wanting to appear before the Citation Review Committee may do so after notifying Public Safety and obtaining an appearance date.

Affirmed: __________________________ Fine Reduced: _________________________

Dismissed: __________________________ Fine Waived: _________________________

Signature of Committee Chair or designee: _________________________________

Date: __________________________

Received By/Date: __________________________ Recorded By/Date: _____________
1. Parking Citation Appeals

You may initiate a Parking Citation Review if you believe that the violation you were charged with either did not occur or that extenuating circumstances existed to warrant the dismissal of the citation.

2. Generally, Parking Citations Are Not Dismissed For Claims of the Following:

- Unauthorized use of parking space regardless if it inconvenienced no one or usage was short in duration.
- Running late for an appointment, work, class, etc.
- Failure to see properly posted parking signage or painted curbs.
- Financial hardship.
- Failure to obtain carpool permit to park in carpool space.

3. Important Information – Do Not Send Payment at This Time

- Appeals may be submitted in person or by email.
- If you appeal a parking citation, the payment due date is temporarily placed on hold pending the outcome of the review. No late charges will be applied during this time.

4. Parking Citation Review Form Instructions

- Fill out the appeal form on the opposite page. Print legibly. Include any information you wish to be considered, including diagrams and/or photographs. Do not attach your original citation(s); keep originals for your records.
- Submit to the Public Safety office at AC2330 or email your completed appeal form to publicsafety2@mhcc.edu within 14 days of citation date.

5. Notification of Results

- You will be notified by email with the results of the review committee unless you specify otherwise in which case you will receive a letter mailed to the address indicated on the form. You may call 503-491-7310 to check on the status of your appeal.
- If your parking citation is dismissed, a letter will be mailed or sent via email to you and no payment will be necessary.
- If your parking citation is deemed to be affirmed, a letter will be mailed or sent via email to you, at which time payment will be due within 14 calendar days of the notice date printed on the appeal result letter. The decision of the committee is final.

6. Questions?

If you have any questions about your parking citation or need assistance in preparing your parking citation appeal form, contact: Public Safety Department at publicsafety2@mhcc.edu or at 503-491-7310, Monday -Friday 8 a.m. - 5 p.m.

7. For Parking Maps and Regulations: http://www.mhcc.edu/parking/.

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