Print Form

EASTERN WASHINGTON UNIVERSITY
PARKING VIOLATION APPEAL

PRINT NAME AND ADDRESS BELOW

NAME _____

ADDRESS_____

CITY _____

STATE _____ ZIP_____

TELEPHONE NUMBER (_____) _____

OFFICE USE ONLY

___FIRST APPEAL
___FINAL APPEAL
___VOID
___UPHELD FINE $_____
___REDUCE TO WARNING
DATE_____SIGNED_____

IMPORTANT: FILL OUT COMPLETELY OR APPEAL WILL NOT BE ACCEPTED

PLEASE READ THE FOLLOWING INSTRUCTIONS:

Type or print your reason(s) for the appeal in the space below. Please be specific and concise about the circumstances. This appeal must be submitted within twenty (20) calendar days of the violation. The first appeal must be submitted in written form. Appealees will receive within 10 working days of the hearing the written decision of the Appeal Board or the Parking Supervisor. If fine(s) are not paid within time frame indicated on your result letter the late fee(s) will automatically be assessed. If you are not happy with the result of the first appeal, you are allowed a second (final) hearing (appeal) at which you must be present to discuss your appeal with the Appeal Board or the Parking Supervisor. The in-person appeal no way indicates that a more favorable decision will be rendered. Failure to appear at any hearing (appeal) you have requested will result in the infraction being upheld, additional fines and fees will be imposed on late transactions. Non-payment of fines is subject to collection methods used by Parking Services and the University (WAC 172.116.320).

COMPLETE THE FOLLOWING:

INFRACTION (TICKET) NUMBER: _____

LICENSE PLATE: _____ **STATE**:_____

The reason for this appeal is:

_____

_____

_____

_____

_____

_____

_____

_____

_____

I certify that all information listed herein is true and correct.

IMPORTANT: IF ALL THE BELOW INFORMATION IS NOT COMPLETE THE APPEAL WILL NOT BE ACCEPTED AND THE FINE WILL AUTOMATICALLY BE UPHELD.

SIGNATURE: _____

DATE:_____ EWU ID _____