

MIDDLEBURY POLICE DEPARTMENT
PARKING TICKET / TOWING APPEAL

Ticket No.: _____ **Date & Time Issued/ Towed:** _____

Location Issued: *(Be specific)* _____

Violation(s): _____

License Plate No.: _____ **State:** _____

Name: _____ **Daytime Phone No.:** _____

Mailing Address: _____

I am appealing / contesting the [] towing [] ticket because: _____

Signed: _____ **Date:** _____

Please complete this form and return it to the Middlebury Police Department at 1 Lucius Shaw LN, Middlebury, VT 05753 . (802) 388-3191

Notice: Appeals must be filed within 10 calendar days of the violation. Failure to file an appeal within the 10-day period constitutes a waiver of your right to appeal.

MIDDLEBURY POLICE DEPARTMENT
PARKING TICKET / TOWING APPEAL INQUIRY REPORT

Date Appeal Received: _____

Received: In person By mail Other _____

Ticket Sustained Fine Assessed: \$ _____

Towing charges sustained \$ _____

Ticket Amended: _____

Fine/Fee Assessed: \$ _____

Towing fee waived

Ticket Dismissed _____

Ticket Appeal Inquiry Report: _____

Reporting Official: _____ Date: _____