



PARKING VIOLATION APPEAL FORM

Submitto: Ketchikan Police Department
361 Main Street
Ketchikan, AK 99901
(907) 225-6631

Your Name: _____

Contact Number: _____

Citation Number: _____

Date on Citation: _____

Vehicle License Number: _____

REASON FOR APPEAL:

- No Sign Posted
- DMV/OWNER Change Pending *(Proof of Title Transfer Required)*
- Time Limit Incorrect *(Explain in Comments)*
- Mechanical Problems *(Explain in Comments)*
- Have Current Parking Lot Permit *(Proof Required)*
- Paid Launch Ramp Fee -or- Have Reserved Moorage Stall *(Copy of Receipt)*
- Have Current Registration *(Copy of Registration Required)*
- Tags Lost *(Proof of Replacement Required)*
- Have Current Handicap Placard *(Copy of Placard Required)*
- OTHER *(Explain below)*

EXPLANATION/COMMENTS: _____

YOU WILL BE NOTIFIED BY MAIL THE DETERMINATION OF YOUR APPEAL - YOUR APPEAL MUST BE RECEIVED WITHIN TEN DAYS OF CITATION ISSUE DATE TO BE CONSIDERED

NOTE: Parking Citation Statements are mailed by the City of Ketchikan on or around the 21st of each month. These Statements do not recognize or reference violations on appeal nor the outcome of such.

FOR INTERNAL USE ONLY			
<input type="checkbox"/> DISMISS	<input type="checkbox"/> DENY	DATE: _____	INITIALS: _____