

**FAYETTEVILLE STATE UNIVERSITY  
CAMPUS POLICE DEPARTMENT**

**PARKING TICKET APPEAL FORM**

This form must be submitted within ten (10) days from the date of the violation. Original or copy of citation must be attached.

Please fill in all the information below and write a statement explaining the specific reason(s) for the appeal. A reply will be mailed to you within ten (10) working days.

You may mail this form and the ticket to:  
**Campus Police Dept., Mitchell Building, Fayetteville, NC 28301**  
Or bring it to the Campus Police Dept.

**PARKING TICKET APPEALS WILL NOT BE CONSIDERED FOR THE FOLLOWING REASONS:**

- **Not knowing the Parking Rules and Regulations**
- **Inability to find a convenient parking space**
- **Financial hardship**
- **Filing an appeal after the allowed time (10 working days)**

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
(Please Print)

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Banner ID#: \_\_\_\_\_

Ticket #: \_\_\_\_\_  
 Student  
 Staff/Faculty  
 Visitor

Parking Decal #: \_\_\_\_\_ Email : \_\_\_\_\_

Statement/Reason for appeal: (Use back if necessary)

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<b>DO NOT WRITE BELOW THIS LINE</b>		
Director of Campus Police Decision:	_____ Denied	_____ Granted