



PARKING VIOLATION APPEAL FORM

<input type="checkbox"/> Faculty	<input type="checkbox"/> Student	Name:		
<input type="checkbox"/> Staff	<input type="checkbox"/> Visitor	Address:		
License Plate #	State of Registration	City:	State:	Zip Code:
		Telephone Number:		
Date of Appeal	Citation Number	Parking Permit Number:		
		Harvard ID Number:		

I HEREBY APPEAL THE ABOVE NUMBERED ALLEGED PARKING VIOLATION ON HARVARD UNIVERSITY PROPERTY. AFTER CAREFULLY CONSIDERING ALL FACTS RELATING TO THE VIOLATION NUMBER SHOWN ABOVE, I BELIEVE I HAVE FAIR AND JUST REASON TO APPEAL AND OBTAIN CANCELLATION.

REASON(S) FOR APPEAL: (PLEASE WRITE LEGIBLY. USE REVERSE SIDE IF NECESSARY) _____

SIGNATURE: _____

- A. Your appeal has been reviewed. You are hereby advised: (see block checked)
 - To pay the Parking office the penalty of \$_____ within seven (7) days of issuance of this notice. For failure to pay penalty, see block checked under "B."
 - Your appeal has been approved, no further action is required of you.
 - The Appeals Committee finds you in violation of Harvard University's parking regulations, but your penalty is waived.
 - No penalty if vehicle is registered with the Parking office within seven (7) days of issuance of this notice.
- B. For failure to pay penalty: Failure to pay penalty within seven (7) days after date of issuance of this notice permits action indicated below.
 - Assessment of late charge penalty.
 - Withholding student transcripts and/or privileges to enroll in the University.
 - Withholding all privileges of registering your motor vehicle and obtaining a parking permit with the University.

PARKING OFFICE USE ONLY	
OUTSTANDING VIOLATIONS AND TOTAL AMOUNT DUE	
_____	INITIALS _____