

Grand Chute Police Department

PARKING APPEAL FORM



DO NOT SUBMIT FORMS FOR THE FOLLOWING MATTERS THAT ARE NOT REVIEWABLE:

1. 2a.m.-6a.m. PARKING violations (unless you have received prior permission to park on street from the Police Dept.)
2. Claims of being unaware of State Statutes or Municipal Ordinances
3. Inability to pay/other financial circumstances
4. Lost or misplaced ticket
5. Failure to receive notices due to incorrect/out-of-date address listing with the Dept of Transportation
6. Failure to remove or cancel license plates prior to selling a vehicle.
7. Parking in HANDICAP-ACCESS stalls (yellow striped area)

⇒ CITATIONS ARE ONLY REVIEWED WHEN APPLICATION FOR REVIEW IS FILED WITHIN TEN (10) BUSINESS DAYS OF THE TICKET BEING ISSUED

NOTE: IF YOU DO NOT RESOLVE THE PARKING CITATION, YOUR INFORMATION WILL BE SENT TO THE STATE SYSTEM AND YOUR REGISTRATION WILL BE SUSPENDED.

PLEASE PRINT

LICENSE PLATE NO.: _____ PARKING CITATION NO.: _____

DATE OF REQUEST: _____ DATE OF CITATION: _____

NAME: _____ PHONE: _____

ADDRESS: _____ ZIP: _____

EXPLAIN REASON FOR REVIEW: _____

Signature: _____ **Date:** _____

MAIL FORM TO OR DROP OFF FORM AT: GRAND CHUTE POLICE DEPT
1900 W GRAND CHUTE BLVD
APPLETON, WI 54913-9613
PHONE: (920) 832-1575

NOTE: In the event you are not notified of a decision within ten (10) business days, due to circumstances beyond our control, it will be your responsibility to resolve this matter.

FOR POLICE USE ONLY

_____ CITATION VOIDED _____ REVIEW DENIED _____ COURT TRIAL

REMARKS: _____

AMOUNT TO BE PAID \$_____ Amount due must be received within 10 days of the "DATE OF REVIEW," along with a copy of this form or the citation.

DATE OF REVIEW: _____ SIGNATURE OF REVIEWER: _____

TITLE: _____