

PARKING TICKET APPEAL LETTER

To: _____

Parking Authority Address: _____

Appellant Information:

Full Name: _____

Address: _____

Contact Number: _____

Email Address: _____

Vehicle Information:

Make and Model: _____

Registration Number: _____

Parking Ticket Details:

Ticket Number: _____

Date and Time of Issue: _____

Location of Alleged Offence: _____

Grounds for Appeal:

I hereby formally appeal against the above parking ticket issued by the Parking Authority. I contend that the ticket was issued unfairly or incorrectly on the following grounds: (state your reasons clearly and concisely below).

Reasons / Evidence:

- The signage was unclear or not visible.
- The vehicle was parked legally in accordance with local regulations.
- There were mitigating circumstances that justify the parking.
- Attached evidence supports these claims (e.g., photos, witness statements).

I respectfully request that the Parking Authority review this appeal and cancel the parking ticket accordingly.

Declaration:

I declare that the information provided in this appeal letter is true and accurate to the best of my knowledge. I understand that providing false information may result in legal action.

Appellant's Signature

Date

Signature: _____

Parking Authority reserves the right to reject appeals that do not conform to procedural requirements.

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