AUGSBURG COLLEGE
PARKING CITATION APPEAL FORM

APPEAL MAY BE COMPLETED ONLINE
If you are an Augsburg student, faculty, or staff member, you may appeal your citation online with no payment due at the time of appeal. Please go to www.augnet.augsburg.edu and log in to AugNet. Below your login, you will see a link to Parking Services. Please follow the link, click on Appeals, and fill out your request. Submit your appeal and wait to hear back from the Parking Committee.

CITATION MUST BE PAID WITH APPEAL
You must pay your ticket in full and attach payment to this form in order to be eligible for an appeal. If your appeal is accepted by the Parking Committee, the full cost of your ticket will be refunded, or the committee may grant a partial refund. You must also attach your copy of the ticket to this form.

PARKING COMMITTEE IS AN INDEPENDENT GROUP
The Parking Committee meets once per calendar month during the school year to consider appeals submitted for parking violations. The committee is composed of students, faculty, and staff representatives. The Parking Committee functions independently of the Department of Public Safety. Only the Parking Committee may dismiss a parking ticket once it has been issued.

THE DECISION OF THE PARKING COMMITTEE IS FINAL
A lost ticket, forgetfulness, parking in a non-designated space, parking only for a short period, failure to display a valid parking permit, and/or not seeing signs are unacceptable grounds for appeal and will not be considered by the committee.

INCOMPLETE FORMS WILL NOT BE REVIEWED
This form must be legible, complete, and include the correct attachments in order for your appeal to be considered by the Parking Committee.

APPEAL FORM IS ON REVERSE SIDE OF THIS SHEET
Provide all of the requested information; make sure to complete the entire back side of this form. Provide any and all relevant information concerning this appeal in the “argument” section of the form – you may attach other supporting documents. Make sure your writing is legible – if the Committee cannot read your writing, your appeal will not be considered. You must attach your copy of the ticket to this form.

OFFICE USE ONLY:  APPEAL ACCEPTED   APPEAL DENIED   FINE REDUCED TO: ____________
DATE REVIEWED: ___________________ DATE REPLY SENT: ___________________
AUTHORIZED SIGNATURE: ____________________________________________
NAME _____________________________________________

ADDRESS OR CAMPUS BOX _____________________________________________

PHONE # __________________________ VEHICLE LICENSE PLATE _______________________

CITATION # ______________________ DATE ISSUED _______________________

DESCRIBE THE LOCATION AND CIRCUMSTANCES OF YOUR VEHICLE AT THE TIME IT WAS TICKETED. INCLUDE FACTS RELEVANT TO THIS APPEAL. YOU MAY DRAW A PICTURE AND ATTACH IT TO THIS FORM.

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STATE YOUR REASON FOR APPEALING THIS CITATION BELOW.

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OFFICE USE ONLY: APPEAL ACCEPTED APPEAL DENIED FINE REDUCED TO: ____________

DATE REVIEWED: _______________________ DATE REPLY SENT: _______________________

AUTHORIZED SIGNATURE: ___________________________________________