

Town of Brookville
1020 Franklin Avenue, Brookville, Indiana 47012
765-547-1082
townadmin@brookvilleindiana.org
www.brookvilleindiana.org



Parking Ticket Appeals Form

To whom it may concern,

I am contesting Citation # _____ I received on _____ at _____
Ticket Number Date Time

which states my car was parked at or near _____ . I am writing
Location

to formally challenge this ticket for the following reasons.

According to; _____ However, in my
List violation written on ticket

Situation _____
Explain technicality or extenuating circumstances

To provide evidence in my favor I have attached _____

to this statement.

For the aforementioned reasons, I am requesting my ticket be dismissed.

Regards,

Signature and printed name