Central Michigan University
Police Department
989-774-3083
Parking Violation Appeal Form

Citation Number __________________ Violation _______________________________ License Plate _______________

Name (Please Print) ___________________________________________________ Local Phone No. _________________

Local/CMU Address _______________________________________________________

Home Address ______________________________________________________________________________________

CMU Email Address _______________________________________________________
(You will be notified of the decision on your appeal via email)

Visitor Email Address ___________________________________________________

Upon completion of this form, you must turn it into Parking Services (or drop box after hours). Appeals will only be
accepted for unpaid citations less than 14 days of the citation issue date.

I do not feel liable for this violation because of the following circumstances:
(Please explain in detail and print clearly).

_____________________________________________________________________________________________________
_____________________________________________________________________________________________________
_____________________________________________________________________________________________________
_____________________________________________________________________________________________________
_____________________________________________________________________________________________________
_____________________________________________________________________________________________________
_____________________________________________________________________________________________________
_____________________________________________________________________________________________________

Signature ________________________________________________________________

INVESTIGATION __________________________________________________________

THIS APPEAL HAS BEEN Accepted □ Denied □

Employee Receiving Appeal

Date __________ Notice Sent _______

Type and Amount __________

Fine ______

Fine Due ______