

# Parking Violations Appeal Form

OFFICE USE
Marked: _____
Date Received: _____
Ticket Paid: _____

**Return to:**  
**Parking Violations**  
**Beaufort Town Hall**  
**701 Front Street**  
**Beaufort, NC 28516**  
**252-728-2141**

You have the right to appeal parking citations issued for violations of the Town of Beaufort. The appeal must be filed with the Town Hall within ten business days of the date of the citation. Appeals that are incomplete or filed after the ten-day period will not be considered. There is a limit of two appeal opportunities, per person/vehicle per year. After the first appeal is filed, all other citations to be appealed must be paid prior to submittal.

Date: \_\_\_\_\_

Name Of Appellant: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Telephone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

## Citation Information

Ticket Number	License Plate	Date of Ticket	Violation
_____	_____	_____	_____

Explain details below. (Use reverse side if continuation is necessary).

---

---

---

---

---

---

---

---

I affirm that this information is true and correct.

Signature of Appellant: \_\_\_\_\_

## Action by the Citation Appeal Committee

DATE OF COMMITTEE REVIEW: \_\_\_\_\_ TICKET NUMBER: \_\_\_\_\_

Approved \_\_\_\_\_ Denied \_\_\_\_\_ Reduced \_\_\_\_\_ Amount Due: \_\_\_\_\_

Comments: \_\_\_\_\_

---

---

\_\_\_\_\_  
Appeal Coordinator

\_\_\_\_\_  
Date