

INCOMPLETE FORMS WILL NOT BE PROCESSED OR CONSIDERED FOR APPEAL!



Sweet Briar College Department of Campus Safety
PARKING TICKET APPEAL FORM

Instructions for completing the Appeal Form

1. Please provide the required information and a clear explanation supporting your appeal of the ticket(s) you were issued.
2. The form must be fully completed and signed and filed with Campus Safety within five (5) business days of the issue date noted on the Parking Ticket. Incomplete forms will be returned to the individual filing them through campus mail.
3. DO NOT attach your copy of the ticket to this form.
4. After five (5) business days, the fine(s) shown on the ticket will be charged to your student account.
5. You are responsible for following up with your appeal.

Print All Information Legibly

Vehicle Owner/Driver Information

Last Name	First Name	SBC ID No.	E-Mail Address		
Address – Students: Please list your on campus address (Building and Room No.)		City	State	Zip	Contact Phone No.

Vehicle Information

SBC Parking Permit No.	Vehicle Year	Vehicle Make	Vehicle Model	Vehicle Color
License Plate No.	State	Other Permit Information (Handicap Permit No., SBC Medical Permit or Other SBC Permit)		

Ticket Information

Parking Ticket No.	Date Ticket Issued	Violation(s) Noted on Ticket
Location your vehicle was parked when ticket was issued		

Have you reviewed the Sweet Briar College Parking Regulations? Yes No

Is your vehicle currently registered with the Department of Campus Safety? Yes No

Parking Regulations may be found on the Campus Safety Website.

Basis/Grounds for your Appeal – Please provide specific details as to why you think the ticket issued in error or was not justified.

Signature of Person Filing Appeal	Date Signed
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CAMPUS SAFETY OFFICE USE ONLY!

Date Appeal Form Received	Received By	Comments
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Appeal Granted
 Appeal Denied
 Appeal Forwarded for Judicial Review

Appeal Decided By
 Director of Campus Safety
 Campus Safety Administrative Coordinator

Appeal Decided By - Signature	Date:	Appellant Notified By	Date Notified
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