



## Citation Appeal Form

Citations may be appealed within 15 calendar days from the date of issuance. A deposit equal to the amount of the fine must be paid prior to submitting an appeal. If the appeal is approved, the deposit will be refunded. If the appeal is disapproved, the citation may be further appealed to the Parking and Traffic Board. Failure to make a timely appeal constitutes waiving the right to appeal, and no delinquent citation or fee will be considered for appeal.

### Appellant Information

First and last name: \_\_\_\_\_

Student/employee ID: \_\_\_\_\_

Email address: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City, state, and zip: \_\_\_\_\_

Vehicle plate number: \_\_\_\_\_ State: \_\_\_\_\_

Citation number: \_\_\_\_\_

### Citation Appeal – Please use additional pages if necessary

Please print or type the reason for your appeal, being as descriptive as possible. The following citations can only be appealed if the responsible customer felt the citation was issued in error; any other reason will not be considered, which include:

- Expired Meter/Pay Lot.
- No University of Nevada, Reno parking permit.
- Parking in improper zone.
- Improper display of permit.
- Improper Parking in Red Zones, no parking zones or in unauthorized areas.

*Enter appeal here, attaching additional pages if necessary:*

**Office use only:** Disposition of appeal

Date paid: \_\_\_\_\_ Amt paid: \_\_\_\_\_ Received by: \_\_\_\_\_ AP: \_\_\_\_\_ Date notified: \_\_\_\_\_

## Credit Card Authorization

By completing and signing this form, I hereby authorize the University of Nevada, Reno Parking and Transportation Services Department to charge my credit card as detailed below.

Please complete this form with payment information, sign and date the form, and fax with completed parking permit application to the Parking and Transportation Services Department Office at (775) 784-6219.

Credit card payments cannot be accepted verbally or by email per the University PCI Compliance policies.

You may also mail the appeal form with payment (check or credit card information) to:

UNR Parking and Transportation Services  
1664 North Virginia Street / MS 0254  
Reno, NV 89557

Cardholder name (print): \_\_\_\_\_

Billing address: \_\_\_\_\_

Credit card number: \_\_\_\_\_

CVC # (security code): \_\_\_\_\_ Contact phone number: \_\_\_\_\_

Expiration date: \_\_\_\_\_ Authorized amount to charge: \_\_\_\_\_

Authorized signature and date: \_\_\_\_\_