

Parking Citation Appeal Request

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, ZIP Code]

[Your Email Address]

[Your Phone Number]

[Recipient Name]

[Parking Authority/Department Name]

[Address]

[City, State, ZIP Code]

Dear [Recipient Name],

I am writing to formally appeal parking citation number [Citation Number] issued on [Date of Citation] for the vehicle with license plate number [License Plate Number]. I would like to provide additional context regarding my situation at the time of the citation.

[Briefly explain the circumstances that led to the citation. Include any relevant details, such as incorrect signage, unexpected vehicle breakdowns, or other extenuating circumstances. Be concise and factual.]

Given the information provided, I respectfully request that this citation be reviewed and reconsidered. I appreciate your time and attention to this matter and look forward to your prompt response.

Thank you for your understanding.

Sincerely,

[Your Name]