



PLAINFIELD POLICE DEPARTMENT

14300 S. COIL PLUS DR.
PLAINFIELD, IL 60544
(815) 436-6544 Fax: (815) 436-1486

DEPARTMENT STAMP

RECEIVED BY: _____

PLEASE PRINT LEGIBLY

PARKING TICKET APPEAL FORM

YOUR NAME, TELEPHONE #, CELL PHONE OR PAGER #, YOUR ADDRESS, CITY, STATE, ZIP CODE

SPECIAL NOTE: Administrative Ordinance and Traffic Tickets CANNOT be Appealed. A Court date may be requested.

TICKET NUMBER (TOP RIGHT SIDE OF TICKET), VIOLATION, DUE DATE

I would like to appeal the issuance of this ticket on the following grounds:
Use reverse side if more space is needed.

YOUR SIGNATURE, DATE

NOTE: If your appeal is UPHELD, no further action is required on your part. If your appeal is DENIED, you will be notified by mail and you may either pay the fine or request or court date to have your case heard by a Judge. You may call the Records Unit at 815-436-6544 for more information.

*** DO NOT WRITE BEYOND THIS POINT *** POLICE DEPARTMENT USE ONLY ***

DISPOSITION: [] APPEAL UPHELD [] APPEAL DENIED
SUPERVISOR'S COMMENTS
SUPERVISOR'S SIGNATURE, BADGE #, DATE
ACTION: 1) Appeal Form To Appeal File. 2) Original Ticket Annotated. 3) LRMS Updated. 4) Appeal Log Updated

DISPOSITION: [] APPEAL UPHELD [] APPEAL DENIED
CHIEF OF POLICE (OR DESIGNEE) SIGNATURE, BADGE #, DATE