



Valencia Campus
PARKING VIOLATION APPEAL

In accordance with the Parking Policies and Regulations of the University of New Mexico-Valencia, I hereby wish to appeal a parking violation issued to me. **NOTE: YOU HAVE 10 DAYS FROM THE ISSUANCE OF THIS TICKET TO APPEAL**

NAME (*PRINT CLEARLY*) _____

Email Address _____ Telephone _____

Vehicle Registration (Plate) _____ Parking Permit # _____

Student ID # _____ Department (*if Staff*) _____

Ticket/Citation Number (*see pre-printed number on ticket*) _____

Date of Violation Notice _____ Location _____

Time of Violation Notice _____ AM / PM Offense listed _____

Date of Appeal (*Today's Date*) _____

REASON FOR APPEAL (*PRINT OR TYPE*)

It may take up to 30 days to receive notification whether your appeal has been approved or denied.

All decisions are Final.

or Save & E-mail as attachment to valsec@unm.edu

POLICE USE ONLY	Appeal Number _____
APPEAL GRANTED <input type="checkbox"/> APPEAL DENIED <input type="checkbox"/> DATE _____ BY _____	
REASON _____	