

PROOF OF HANDICAPPED

APPEALS MUST BE FILED WITHING TEN (10) DAYS OF ISSUE DATE

PLEASE MAIL THE FOLLOWING WITH APPEAL FORM:

COPY OF HANDICAPPED PLACARD

COPY OF DRIVER'S LICENSE OR IDENTIFICATION OF THE PERSON THE
PLACARD IS REGISTERED TO

COPY OF TICKET

IF VEHICLE IS REGISTERED TO SOMEONE OTHER THAN HANDICAPPED
PERSON, PLEASE MAIL PROOF HANDICAPPED PERSON HAD BEEN IN
VEHICLE AT THE TIME THE TICKET WAS ISSUED.



Parking Citation Appeal Form

To send in your request for an appeal, fill out this form. Be sure to fill in all information and mail to:

Greensboro Downtown Parking
300 W. Washington St., Room UG-29
Greensboro, NC 27401

Appeals must be made within 10 days of the issue date of the parking citation.

If you have not received a response by mail within two weeks, please contact the Downtown Greensboro Parking office at 336-373-2648.

Date

Name

Email

Street Address

City

State

Zip

Phone

NOTE: The field below is required. **To avoid a processing delay, please include the Citation Number.** Thank you!

Citation Number

Citation Issue Date

Location of Violation (Give specific address and closest intersection)

Reason for Requesting Dismissal