

**CITATION APPEAL FORM**

**MT. SAN ANTONIO COLLEGE**

**Appeal No.:** \_\_\_\_\_ **Citation No.:** \_\_\_\_\_

**Parking Control Office**

Date Appeal Form Issued: \_\_\_\_\_ Administrative Hearing: \_\_\_\_\_

Date Submitted/Received: \_\_\_\_\_ (counter-mail-fax) Received by: \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Name (print): \_\_\_\_\_ Banner ID No.: \_\_\_\_\_ Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_ Tel No.: (\_\_\_\_) \_\_\_\_\_

Citation No.: MS \_\_\_\_\_ Dated: \_\_\_\_\_ Violation Location: \_\_\_\_\_

Staff/Student Parking Permit No.: \_\_\_\_\_  Visitor  Student  Staff

Reason Citation was issued: \_\_\_\_\_

Briefly explain your reason for wanting the citation to be dismissed: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_

**YOUR APPEAL HAS BEEN REVIEWED AND THE FOLLOWING ACTION TAKEN:**

1. **DENIED:** The citation is being returned to you for your subsequent action. \_\_\_\_\_  
Date Appeal reply mailed

You may pay the citation and no further action on your part will be required; or pay the bail amount at Building 4, Parking Office, and request an Administrative Hearing. You may request an administrative hearing without payment of the parking penalty upon satisfactory proof of an inability to pay the amount due. The Hearing must be requested within 21 days from mailing of this Appeal decision, which is \_\_\_\_\_.

2. **GRANTED:** Your Appeal has been granted and the citation has been canceled. \_\_\_\_\_  
Date reply mailed

Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR OFFICE USE ONLY**

Citation Paid \_\_\_\_\_ Not Paid \_\_\_\_\_ Financial Aid Temporary Waiver \_\_\_\_\_ Refund Due \_\_\_\_/\_\_\_\_  
Date Date Yes No

**GRANTED / DENIED:** \_\_\_\_\_

**Nicole Grisanti, Administrative Hearing Officer** \_\_\_\_\_