



# Auxiliary Services Parking Citation Appeal Form

**Instructions:** Complete the form below and submit to [parkingservices@asurams.edu](mailto:parkingservices@asurams.edu). All appeals must be submitted within five business days from the date the citation was issued. Payment and late fees are suspended during the appeal process. If you file an appeal, you will be notified by e-mail when a decision has been rendered. You must submit one form per citation.

DATE: \_\_\_\_\_ RAM ID: \_\_\_\_\_

NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ ALTERNATE PHONE: \_\_\_\_\_

ASU EMAIL: \_\_\_\_\_

PERSONAL EMAIL: \_\_\_\_\_

## **CITATION INFORMATION:**

CITATION NUMBER: \_\_\_\_\_ DATE OF VIOLATION: \_\_\_\_\_

REASON FOR VIOLATION: \_\_\_\_\_

WAS YOUR VEHICLE TICKETED OR TOWED? ☐ TICKETED ☐ TOWED

### **THE FOLLOWING REASONS ARE NOT GROUNDS FOR AN APPEAL:**

- LACK OF KNOWLEDGE OF ASU PARKING RULES
- LATE TO CLASS OR APPOINTMENT
- INABILITY TO FIND A LEGAL PARKING SPACE
- STUDENT/FACUTLY/STAFF PARKED IN DESIGNATED VISITORS SPACE
  - ENROLLED STUDENTS AND EMPLOYEES ARE NEVER VISITORS

**REASON FOR APPEAL:** (USE THE BACK OR ATTACH ADDITIONAL PAGES IF NECESSARY)

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## **PARKING PERSONNEL ONLY:**

APPEAL DECISION: ☐ APPROVED ☐ DENIED ☐ OTHER

COMMENTS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_