

Town of Brookville  
1020 Franklin Avenue, Brookville, Indiana 47012  
765-547-1082  
townadmin@brookvilleindiana.org  
www.brookvilleindiana.org



Parking Ticket Appeals Form

To whom it may concern,

I am contesting Citation # \_\_\_\_\_ I received on \_\_\_\_\_ at \_\_\_\_\_  
Ticket Number Date Time

which states my car was parked at or near \_\_\_\_\_ . I am writing  
Location

to formally challenge this ticket for the following reasons.

According to; \_\_\_\_\_ However, in my  
State violation

Situation \_\_\_\_\_  
Explain technicality or extenuating circumstances

To provide evidence in my favor I have attached \_\_\_\_\_  
\_\_\_\_\_

to this statement.

For the aforementioned reasons, I am requesting my ticket be dismissed.

Regards,

\_\_\_\_\_  
Signature and printed name