

**Lock Haven University-Public Safety  
Parking Violation Appeal Form**

**Instructions:** Complete this form and return it within five days of the issue date to: Lock Haven University-Public Safety Department 401 North Fairview Street, Lock Haven, PA 17745. The personal statement must be legible. A copy of this form will be returned to you with the disposition of your appeal. It is assumed that the appellant is familiar with Lock Haven University-Parking Regulations and Traffic/Parking Signs.

**Personal Information:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
(Decisions will be mailed to above-address.)

**Violation Information:**

Ticket Number \_\_\_\_\_ Ticket Date/Time \_\_\_\_\_

Decal Number \_\_\_\_\_ Status (circle one) \_\_\_\_\_ Faculty/Staff/Student/Visitor \_\_\_\_\_

**Personal Statement:** \_\_\_\_\_

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

**Official Use Only**

Action Taken: Date of Review \_\_\_\_\_ Officer's Signature \_\_\_\_\_

\_\_\_\_\_ Granted \_\_\_\_\_ Denied \$ \_\_\_\_\_ Amount Due \_\_\_\_\_

Pay Fine by \_\_\_\_\_ in the Public Safety Office-Glennon Infirmary or mail to Lock Haven University-Public Safety 401 North Fairview Street, Lock Haven, PA 17745 (Checks made payable to Lock Haven University-Public Safety)