## <u>Lakeland Campus Police – Parking Citation Appeal</u>

## ALL FIELDS ARE MANDATORY

Please provide detailed information and if applicable, your handicapped permit number.

I am primarily:   Student	☐ Faculty/Staff ☐ Visitor/other
First Name:	Last name:
Street Address:	
	Cell/Other:
Email address:	
Citation Number	Officer #
Date of Violation:	Location of Violation:
Vehicle License Plate:	Vehicle Make/Model
Handicapped Permit Number:	
_	circumstances in support of this appeal. I have read all of the at Lakeland and the appeal process. All information provided i