

**PARKING APPEALS COMMITTEE**  
THE UNIVERSITY OF NORTH CAROLINA

Note: All items must be filled in before the appeal will be heard. This form must be submitted to the appeals officer **within the ten (10) calendar days after the decision of the Hearing Officer.**

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

Current Address: \_\_\_\_\_  
\_\_\_\_\_

Permanent Address: \_\_\_\_\_  
\_\_\_\_\_

UNC Affiliation:     Employee     Student     Visitor     Other \_\_\_\_\_

PID Number: \_\_\_\_\_                      UNC Permit Number: \_\_\_\_\_

Citation Numbers	Dates(s)	Violation Code(s)	License Plate	Amount	Location
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

**Grounds for Appeals** (be factual and specific, include diagrams and documentation if pertinent)

Date received in Appeals Office: \_\_\_\_\_

Hearing Officer's Comments:

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

Date received by Parking Appeals Committee: \_\_\_\_\_

**Please print form and submit to Transportation & Parking in person or by mail to:**

**Transportation & Parking**  
285 Manning Drive  
Chapel Hill, NC 27599-1610