

PARKING TICKET APPEAL FORM

Parking Department
626 Geneva Street
Lake Geneva, WI 53147

Phone: (262) 248-3673
Fax: (262) 248-4715
Email: parking@cityoflakegeneva.com



Appeals must be made within 30 days of ticket issuance.

Do not submit payment with appeal as no refunds will be issued. Thank you!

You will not accrue any additional late fees or fines while in the appeal process.

Fill in COMPLETELY (please print clearly) and return with a copy of your ticket and pay station receipt.

Today's Date _____

Ticket Number _____

Name _____

Mailing Address _____

City _____

State _____

Zip _____

Phone _____

Email Address _____

Basis of your appeal _____



Your Signature above confirms that the information provided is true and accurate.

Employee Taking Complaint

Your concerns are important to us. You will be notified of the decision.