



RED ROCKS COMMUNITY COLLEGE CAMPUS POLICE

Sean P. Dugan, Chief of Police
13300 W. 6th Ave
Lakewood, CO 80228



PARKING APPEALS FORM

Instructions:

This form must be completed and returned to the RRCC Campus Police Department, Room 1455, within ten (10) days from the date indicated on the Parking Violation. No appeal will be considered after that date. Print clearly as illegible and or incomplete forms may have an effect on the outcome of the Appeal Boards decision. Please provide a reason for your appeal, and if necessary, a detailed drawing of the situation to demonstrate your position (use the back of this form for drawing). Please note - DECISION OF THE APPEALS BOARD IS FINAL.

A copy of the Parking Violation Ticket MUST be attached.

Date: _____ (MM/DD/YR) S Number: _____

Parking Permit Number: _____ Email Address: _____

Name: _____ Phone Number: (____) _____

Street Address: _____ City: _____ State: _____ Zip: _____

Statement for Appeal: _____

Date of Violation: _____ Plate#: _____ Ticket#: P _____

I certify that the above information is true and correct:

Signature: _____

FOR OFFICE USE ONLY - TO BE COMPLETED BY CAMPUS POLICE.

Date Appeal Filed:

Date: _____ Time: _____ AM/PM

Signature of Person Accepting Appeal: _____