PARKING TICKET APPEAL FORM

Please Print Clearly

City of Bend Municipal Code Chapter 6.25.000 allows individuals to appeal the issuance of UNPAID parking tickets within 10 days of the issue date. This must be done in writing. Use of this form is sufficient when submitting an appeal. Completed forms should be sent to City of Bend Parking Services Division, 841 NW Bond St Suite 7, Bend, OR 97701.

If you have any questions, contact the City of Bend Parking Services Division at (541) 317-2805 or via email to parking@bendoregon.gov.

Use of this form is not required by law. A signed letter may be submitted instead, but must include all of the information requested below. Disposition of this appeal will be given to the registered owner of the vehicle.

CITATION/TICKET INFORMATION

Citation/Ticket Number:	*Issue date:*
Location:	*License Plate Number:*
Name of Registered Owner:	*Address:*
City/State:	*ZIP:*
Phone:	*Email:*

HEARING PREFERENCE (CHOOSE ONE)

☐ Hearing by Mail ☐ In Person Hearing

DISMISSAL REASON

You must show good and sound reason why you feel this ticket should be dismissed. It is your responsibility to clearly state your case and to show and submit proof for your appeal. Use back side if necessary.

(Lack of knowledge of regulations, other vehicles were also parked improperly, lack of space, unread or misunderstood signs, parking only for short period of time, failure to display parking permit, lost citation or forgetfulness, are NOT grounds to appeal a citation.)

Signature

Date

The City reserves the right to process this as either a written appeal or a request for a hearing.

Please submit parking appeals via email to parkingappeals@bendoregon.gov or to:

Diamond Parking LLC
c/o Parking Services Division
841 NW Bond St Suite 7, Bend, OR 97701