



THE CITY OF FORT WAYNE
 VIOLATIONS BUREAU
 CITIZENS SQUARE • 200 EAST BERRY STREET • SUITE 110
 FORT WAYNE, INDIANA 46802-2733

PHONE 260-427-1208
 FAX 260-427-8598

Ordinance Violation Appeal Form

Form must be completed in its entirety. Please print legibly.

Today's Date: _____ **Date of Violation:** _____

Ticket #: _____ **License Plate #:** _____

Type of Violation: Parking or False Alarm
(Please Circle One)

Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Telephone #: _____ **Email Address:** _____

Reason for Appeal:

In asking for my violation to be reviewed, I agree to abide by the decision and to cooperate in furnishing pertinent information.

Signed: _____

A letter of determination will be mailed to you within 10 days.

Please return completed Appeal Form with any supporting documentation to:

Fort Wayne Violations Bureau
 200 E Berry Street, Suite 110
 Fort Wayne, IN 46802
 Fax: 260.427.8598