

Citation Appeal Form

In California, the burden of proving that a parking citation was issued in error or should otherwise be dismissed falls upon the appellant. A solid case will include statements, documents and/or photographs that clearly support at least one of these arguments (CVC 40215(a)):

 The violation did not occur The registered owner was not responsible for the violation Extenuating circumstances make dismissal of the violation appropriate 						Disp	<i>Official</i> osition:	l Use Only	
						A N	A L	V	
Please complete, sign, and submit form	by mail, fax, or in	person. Com	plete a separate	form for each citation	on.				
Citation number (As it appears on your citation)	Vehicle licen	se plate (If no pl	ate, last 4 of VIN)	last 4 of VIN) Date citation issued					
Parking permit or Pay station transaction #	Pay station #	or location		UCSD ID #					
UCSD affiliation: _	Student	Staff	Faculty	Patient	Contractor		_ Visitor		
Last name			First name					_	
Address line									
City			State or Province	·					
ountry			Zip or country o	Zip or country code					
Phone	Extension	 Em	nail address						

Reason for cont	esting:
-	
·	
	Note: It's your responsibility to follow-up on the results of this appeal. View your account at https://transportation.ucsd.edu or call (858) 534-4356.
Signature:	Date:

Mail, fax, or deliver appeal in person within 21 days from citation issue date.

Citation penalty does not escalate during review process.

https://transportation.ucsd.edu

Mail:

UC San Diego
Office of Citation Appeals Administration
9500 Gilman Drive Mail Code #0042
La Jolla, CA 92093-0042
(858) 5344356

Fax:

(858) 822-1226

Hand deliver to the:

Commuter and Visitor Information Center

- Gilman Parking Structure Campus (858) 534-4223
- Osler Parking Structure Campus (858) 246-3007
- Athena Parking Structure Health Systems La Jolla (858) 822-2113
- Bachman Parking Structure Health Systems Hillcrest (619) (619) -6524