PARKING INFRACTION REVIEW FORM

OFFICE OF THE CITY ENGINEER
Bylaw Department
944 James Street, P.O. Box 1539
Woodstock, ON N4S 0A7

I hereby request that the Corporation of the City of Woodstock Bylaw Department review the following:

Parking Ticket/Infraction Notice No. _____

I am the registered Owner of the Vehicle

I am authorized by the registered Owner of the vehicle to make this request

First & Last Name: _____

Address: _____ **Postal Code:** _____

Phone No.: _____ **Email Address:** _____

License Plate No. _____ **Date of Infraction:** _____

Please provide a factual and detailed reason for your request to dispute this Offence:

NOTE: The parking review process may take longer than seven (7) days to administer. By submitting a review, the early payment amount may no longer be applicable. You may request a trial without submitting a parking review in accordance with the Provincial Offences Act, R.S.O. 1990, c. P.33.

_____ _____

Applicant Signature **Application Date**

FOR OFFICE USE ONLY

By-Law Enforcement Comments:

_____

_____

Conclusion of the Review and Date Contacted:

_____

_____

City Hall/Engineering Office – Review taken by: _____

Submit your completed form along with a copy of your parking ticket to the City of Woodstock in person to address noted above, by fax to 519-421-3250 or email to bylawenforcement@cityofwoodstock.ca