

PARKING TICKET OBJECTION

Manchester Police Department Records Division
239 Middle Turnpike East
P. O. Box 191
Manchester, CT 06045-0191
Tel. (860) 645-5558 Fax (860) 643-2939

Date of Objection _____

Knowing that this statement may be used against me in any court proceedings, I declare, under the penalties for perjury, that the following statements are true with reference to the parking ticket numbered below:

Location: _____ Parking Ticket Number: _____

1. Said parking ticket was placed on motor vehicle registration (license plate) number: _____
which was owned/operated by me, on the following date: _____
2. The said parking ticket was improperly placed on the said vehicle for the following reasons:
(WRITE EXPLANATION ON REVERSE SIDE).

Print name of owner or operator of above vehicle

X _____
Signature of owner or operator of above vehicle

Street address, city, state and zip code

Telephone number and time available

DO NOT WRITE BELOW THIS LINE. MAIL OR DELIVER THIS FORM TO MANCHESTER POLICE DEPT.

Your objection is: ☐ **Acceptable – Your ticket has been voided.**
☐ **Unacceptable – Pay \$_____ within 10 days or fine will double**
Date notification sent _____

If you are not satisfied with the above action, you are entitled to a hearing with one of the Town's Parking Violations Hearing Officers. Check the box below and return this form to the Manchester Police Department within 10 days of this notification if you would like a hearing.

☐ **I hereby request a Hearing with the Parking Violations Officer**

If you check the box for a hearing, your hearing date will be Wednesday, _____ at 6:30 p.m. at the Manchester Police Department, 239 Middle Turnpike East, Manchester, CT. Please be advised that there may be several other hearings on the same date and objections will be heard in alphabetical order or pursuant to any other alternative method established by the Police Department or Hearing Officer. This form must be returned to the Police Department to insure proper compliance with the decision of the Hearing Officer.

Date hearing request was received by Manchester Police Department: _____

PARKING VIOLATIONS HEARING OFFICER'S DECISION

- ☐ I hereby concur with the objection. Your ticket has been voided.
- ☐ I hereby concur with the Police Department. See payment requirements below.

Signature of Hearing Officer

Date

Date _____ Pay \$_____ within 10 DAYS OR FINE DOUBLES.