

Towing Appeal Form



General Information:

Name		Student/Staff ID	
E-mail Address		Contact #	

Appeal Date(s)

Date of Tow		Date Tow Appeal Submitted	
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Vehicle Information:

Vehicle Make	Vehicle Model	Color	License Tag #	State

Appeal Information:

Reason for Appeal	
<input type="checkbox"/> Guilty / Requesting Mercy	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Innocent / Wrongfully Towed	_____
Description of Circumstances	

Description of Circumstances (Continued)

For Office Use Only:
Towing Appeal is _____ Sustained _____ Denied Date:_____
Notes: