



**TOWN OF RIDGEFIELD
Parking Authority**

OBJECTION TO ISSUANCE OF PARKING VIOLATION

This is to notify you that if you wish to appeal your parking violation, **YOU MUST APPEAR IN PERSON** at the Town Hall, Lower Level Large Conference Room on _____ at 7:30 p.m. Please fill out this form and mail it to: Parking Hearing Officer, 400 Main Street Ridgefield, CT 06877.

Please attach your ticket.

I object to the issuance of Parking Ticket # _____ issued on _____ for the following reason (s).

Name (please print): _____ Date of objection: _____

Address _____ Town/City _____ State _____ Zip _____

Phone Number _____ Signature _____

Appeal Officer Signature: _____ Date: _____ Decision Code _____