

## Village of Peotone

## Peotone Police Department

Office of Traffic Compliance Administrator 208 E Main St Peotone II 60468

## PARKING PROTEST FORM

\*\*Please Print Clearly\*\*

	r iease r	Till Clearly	
Ticket Number:		Date Issued:	
Name:			
Address:			
City:		State: Zip Code:	
Contact Phone Number: _			
Reason for protesting tick	et (Must provide app	licable evidence):	
		(If more space needed	d use back)
days of said denial. In turn	n, if the ticket is not p test is accepted the o	, you will be notified by phone or mail aid, then a notice to appear in court w itation will be voided based on the info	vill be
Signature of complainant,	/defendant:		
Signature of complainant,	***FOR OFF	CE USE ONLY***	
Date Received:	Time:	Received by:	
Disposition (check one) Voluments:	oidedD	enied	
Officer signature:		Date:	
Date denial letter sent:			