



# CITY OF WORCESTER

Office of the Parking Administrator

Room 203, City Hall

455 Main Street

Worcester, MA 01608

Massachusetts General Laws Chapter 90 § 20A½ allows individuals to appeal the issuance of UNPAID parking tickets. This must be done in writing. Use of this form is sufficient when submitting an appeal. Completed forms should be sent to the address listed above, or submitted in person at the Parking Administrator's Office. If you have any questions, contact (508) 799-8656.

**Payment of this ticket is an admission of the parking violation. All appeals must be received by this office within 21 days of the date of the ticket issuance.**

Name	Registered Owner, If Different
Address	Address
City/State                      Zip Code	City/State                      Zip Code
Phone	Phone
Ticket #: _____	Plate #: _____
Location: _____	Meter #: _____ (If applicable)

Please state the reason(s) you feel this ticket should be dismissed. Draw a diagram if necessary.

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Use Reverse Side If Necessary

Signature \_\_\_\_\_

Date \_\_\_\_\_

**NOTE: Use of this form is not required by law. A signed letter may be submitted instead, but must include all of the above information. Disposition of this appeal will be given to the registered owner of the vehicle.**