



Please return this form to:
Pittston Parking Authority
35 Broad St. Suite 202
Pittston, PA 18640

Pittston Parking Authority Parking Violation Appeal Form

Please fill out the following form explaining why you believe your violation was issued in error. If you have additional documentation (pictures, Pango receipts, etc.) that you wish to add to your appeal form, please attach them.

DO NOT SEND OR ATTACH THE ORIGINAL VIOLATION

Late fees will not be accumulated during the review process. You will be notified of a decision within 7 days of receipt o by mail.

Appeals are not accepted if made more than 5 days after the day of issuance of the parking ticket.

General Information

Date: _____

First Name: _____

Last Name: _____

Street Address: _____

City/State/Zip: _____

Phone Number: _____

Email: _____

Date of Appeal: _____

Parking Violation Number: _____

Date Parking Violation Issued: _____

Violation Amount: _____

Please describe why you believe this violation was issued in error:

Signature: _____