



**BRAINERD POLICE DEPARTMENT**  
**225 East River Road**  
**Brainerd, MN 56401**  
**Phone: (218) 829-2805**



**PARKING TICKET APPEAL FORM**

NAME: \_\_\_\_\_

TICKET NUMBER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

VEHICLE LICENSE: \_\_\_\_\_

PHONE: \_\_\_\_\_

DATE OF APPEAL: \_\_\_\_\_

**REASON FOR REQUESTING APPEAL:**

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\*\*\*\*\* *DO NOT WRITE BELOW THIS LINE* \*\*\*\*\*

APPEAL GRANTED:

APPEAL DENIED:

EXPLANATION:

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SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

**NOTE: If the appeal is denied, payment must reach the Brainerd Police Department within ten (10) calendar days from the date the appeal was denied or the fine will double.**