



PARKING INFRACTION REVIEW FORM

OFFICE OF THE CITY ENGINEER
Bylaw Department
944 James Street, P.O. Box 1539
Woodstock, ON N4S 0A7

I hereby request that the Corporation of the City of Woodstock Bylaw Department review the following:

Parking Ticket/Infraction Notice No. _____

I am the registered Owner of the Vehicle

I am authorized by the registered Owner of the vehicle to make this request

First & Last Name: _____

Address: _____ Postal Code: _____

Phone No.: _____ Email Address: _____

License Plate No. _____ Date of Infraction: _____

Please provide a factual and detailed reason for your request to dispute this Offence:

Review forms submitted during the "Early Payment" period will allow the suspension of the time-period until the review is concluded.

Applicant Signature

Application Date

FOR OFFICE USE ONLY

By-Law Enforcement Comments:

Conclusion of the Review and Date Contacted:

City Hall/Engineering Office – Review taken by: _____

Submit your completed form along with a copy of your parking ticket to the City of Woodstock in person to address noted above, by fax to 519-421-3250 or email to

bylawenforcement@cityofwoodstock.ca