

PARKING INFRACTION REVIEW

I hereby request that the Corporation of the City of Woodstock Parking Office review the following Parking Infraction Notice # _____.

The reason(s) for my request:

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- () I am the registered Owner of the Vehicle
- () I am authorized by the registered Owner of the vehicle to make this request

NAME	
ADDRESS	
POSTAL CODE	
PHONE NUMBER (HOME)	
PHONE NUMBER (BUS)	

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

Signature Date

FOR OFFICE USE ONLY

By-Law Enforcement Comments:

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Conclusion of the Review and Date Contacted:

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City Hall/Engineering Office – Review taken by: