

Parking fine appeal form

Appeal submission deadline is 3 – three – weeks All fields marked with * must be filled out

The course										
The appealer's name *								Postal a	address *	
The vehicle's						.44		l code *	0" () () *	
licence registration number and registered country *						stered country *	(ZIP	code)	City (and state) *	
Parking fine number * The fine was issu										
(See	See "llegginsnr.:" on the yellow form) (See «Dato» on					(See «Dato» on	the yellow form	n) The	appealer's home country *	
Reason for the appeal *										
Write on the back side if more space is needed										
E	E-mail a	address	(if you	i wish t	o recei	<i>ive our response elec</i> CAPITAL LETTERS	tronically)	Phone-	or cellphone number country code, +44 for example)	
		VV	rite cie	ariy an	d with	CAPITAL LETTERS		(Must illeliade	country code, +44 for example,	
				Plac	e and	date *		The appeal is	received by Voss Parkering:	
								Date:		
The appealer's signature *										
								Stamp a	nd attendant's signature	

phone: +47 924 45 539

e-mail: post@vossparkering.no