

Parking Meter Malfunction Form

Name: _____
Last First MI

Mailing Address: _____

City: _____ State: ____ Zip Code: _____

Phone Number: _____ Email: _____

Location of Meter: _____

Meter Number: _____ Vehicle License Plate: _____

Amount of Money Inserted: _____ Time Received: _____

How much time were you supposed to get? _____

Parking meter ticket if received, please provide the ticket number: _____

Type of Malfunction:

Meter Dead Meter Failed Meter Jammed Insufficient Time for Money Inserted

Comments:

The condition of the meter will be checked, if you wish to be notified of the findings, please print the email address you wish the information to be sent to.

Please notify me at the following email address: _____

If you were cited and feel the ticket was in error, you may complete a citation appeals form. Information regarding the appeals process can be found on the Transit and Parking Departmental web site at: <http://parking.uark.edu> under the Parking Control section.