



APPLICATION TO VOID TRAFFIC TICKET

TOWN OF CASTINE
P.O. BOX 204 – 67 COURT STREET
CASTINE, MAINE 04421

PHONE (207) 326-4502; FAX (207) 326-9465 EMAIL: townoffice@castine.me.us

Office Use Only
RECEIVED
By _____
Date _____

PURSUANT TO § 5.3 OF THE CASTINE TRAFFIC ORDINANCE, THE RECIPIENT OF A TRAFFIC TICKET ISSUED UNDER THIS ORDINANCE MAY APPLY TO HAVE THE TICKET VOIDED AS FOLLOWS:
1. SUBMIT THIS APPLICATION TO THE TOWN MANAGER IF THE RECIPIENT BELIEVES THE TICKET WAS ISSUED IN ERROR.
2. SUBMIT A WRITTEN APPEAL TO THE BOARD OF SELECTMEN IF THE RECIPIENT DISAGREES WITH THE TOWN MANAGER'S DECISION.
Please note the Town can not act on an incomplete application.

• **TICKET INFORMATION (PLEASE ATTACH COPY):** TICKET #: _____ DATE ISSUED: _____

• **APPLICANT:**
NAME: _____
MAILING ADDRESS: _____
CITY, STATE, ZIP: _____ PHONE: _____
EMAIL ADDRESS: _____

• **VEHICLE INFORMATION:**
YEAR: _____ MAKE: _____ LICENSE NO.: _____ STATE: _____

• **REGISTERED OWNER OF VEHICLE (IF NOT APPLICANT):**
NAME: _____
MAILING ADDRESS: _____
CITY, STATE, ZIP: _____

• **DESCRIBE WHY YOU BELIEVE THIS TICKET WAS ISSUED IN ERROR:** _____

SIGNATURE OF APPLICANT

DATE

FOR TOWN OFFICE USE

TRAFFIC OFFICER COMMENTS _____

APPLICATION IS: **APPROVED** **DENIED** ON _____ FOR THE FOLLOWING REASON(S):

