

**The City of York
Pennsylvania**

Honorable Michael Ray Helfrich, Mayor



Economic and Community Development

101 South George Street
York, PA 17401
www.yorkcity.org

NEIGHBORHOOD IMPROVEMENT ORDINANCE TICKET APPEAL

TICKET NUMBER: ISSUE DATE: APPEAL DATE:

ADDRESS:

APPELLANT'S NAME:

ADDRESS:

HOME PHONE: ADDRESS CITY STATE ZIP CODE
WORK PHONE: CELL PHONE:

EMAIL ADDRESS:

REASON FOR APPEAL:

Your appeal, if filed within 10 days of the issuance of the ticket, will be reviewed by the Hearing Officer. There is no hearing associated with the appeal. The Hearing officer may uphold the appeal, deny the appeal, or modify the violation ticket and/or any associated costs, fines or penalty amounts.

APPELLANT'S SIGNATURE: _____ DATE: _____

RECEIVED DATE:

OFFICE USE ONLY

DATE SENT TO HEARING OFFICER: BY:

DATE RETURNED FROM HEARING OFFICER: INITIALS REC. BY:

BY: ☐ APPEAL UPHeld ☐ APPEAL DENIED ☐ TICKET MODIFIED ☐ FINE MODIFIED

HEARING OFFICER DECISION:

HEARING OFFICER: _____

SIGNATURE

DATE