DEPARTMENT OF POLICE SERVICES
TOWN OF HAMDEN
2900 Dixwell Avenue
Hamden, CT 06518

Vehicle Impoundment/Parking Citation/Ordinance Citation Objection Form

Citation Tag Number: _____ Violation Number: _____

Street Location of Tow/Citation: _____ Date of Tow/Citation: _____

Vehicle Information:

Make: _____ Model: _____ Year: _____ Registration: _____
(State and Number)

Owner Information:

Name: _____ Telephone Number: _____

Street Address: _____

City, State, Zip: _____

Reason for Objection:

_____

_____

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(Use Reverse Side if Additional Space is Needed)

This form must be submitted within fifteen (15) days of issuance of parking citation, filled out in its entirety and submitted to the Office of the Chief of Police, Town of Hamden, 2900 Dixwell Avenue, Hamden, CT, 06518, before a hearing is scheduled by the Parking Violation Hearing Officer.