Ticket Number: _____

Date Submitted:

VILLAGE OF GENESEO
PARKING VIOLATIONS DIVISION
PARKING TICKET DISMISSAL REQUEST

Last Name_____ **First Name** _____**M.I.**_____

Current Mailing Address _____

City _____ **State** _____ **Zip Code** _____

Phone _____ **Email** _____

Date Issued _____ **License Plate** _____

Please provide a brief explanation as to why you are unable to make it to court and why you believe you should be eligible for a dismissal below.

_____
_____
_____
_____
_____
_____

Please submit your request along with a copy of the ticket in person or via mail to:

Village of Geneseo
Parking Violations Division
119 Main Street
Geneseo, New York 14454

WARNING: Please allow 7-10 business days for a response to your request via mail to the address provided above. Notice of unpaid fee will be sent to Department of Motor Vehicles for possible registration suspension.

Official Use ONLY:

Return Court Date_____ Dismissed_____

Date_____ _____
Geneseo Village Justice