

CITY OF DE PERE

Police Department



325 S. Broadway Street, De Pere, WI 54115 | <https://www.deperewi.gov>

Email: dppd@deperewi.gov

Phone: [920-339-4078](tel:920-339-4078)

PARKING CITATION CONTEST FORM

I, _____, hereby plead **Not Guilty** to
parking citation number _____ in Municipal Court.

I understand that by requesting this challenge, I waive my right to two notices pursuant to Section 345.28, Wisconsin Statute. I likewise realize that in the event I fail to appear at any subsequent appearances, or I am found guilty of this offense and fail to pay the required forfeiture, the Municipal Court can issue a warrant for my arrest and suspend my driving privileges. I understand that the court may tax costs against me if I am found guilty of this violation.

I hereby waive my Initial Appearance and plead **NOT GUILTY** and understand that the Municipal Court will notify me of my trial date by mail.

Name: _____ DOB: _____

Address: _____

City: _____ State: _____

Zip Code: _____

Phone Number: _____

Plate Number: _____

☐ Yes, I am the registered owner of the vehicle.

☐ No, I am not the registered owner of the vehicle.

Date: _____

Signature: _____

Print Name: _____

Please Email to: dppd@deperewi.gov

OR mail to: De Pere Police Department

Attn: Police Business Manager

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