



# MARLBOROUGH MASSACHUSETTS

## Parking Clerk

Office of the Collector  
City Hall • 140 Main Street • 1st Floor  
Marlborough, Massachusetts 01752-3898

(PLEASE PRINT CLEARLY)

(PLEASE PRINT CLEARLY)

First Name:

Last Name:

Address:

City:

State:

Zip Code:

Telephone:

Email:

Date of Ticket:

Ticket Number:

License Plate Number:

License Plate State:

Vehicle Make:

Vehicle Model:

Vehicle Color:

Vehicle Year:

- Appeal requests must be received within **21 calendar days** of the ticket issuance date, **NO appeals** will be accepted outside of this time frame.
- An appeal request will not be considered unless all information on the form is complete and legible.
- You may request a **Hearing by Mail** or **In Person**. Please complete this form, and mail or deliver it to the Office of the Collector (Listed above). If appealing your ticket by mail, please include a detailed reason for your appeal below.

<input type="checkbox"/> Check here if requesting a hearing appeal decision by mail. Please include a detailed reason for your appeal	<input type="checkbox"/> Check here if you are requesting a hearing appeal in person
--	--

**Detailed Reason for Appeal:**

**Failure to appear at your in-person hearing will require full payment of the fine and any late fees.**

Tel: (508) 460-3737 • Email: [ParkingClerk@Marlborough-MA.gov](mailto:ParkingClerk@Marlborough-MA.gov)