Penalty Charge Notice Challenge Form

Penalty Charge Notice	number	Date of issue
Vehicle registration nu	mber	
Full Name	Mr/Mrs/Miss/Ms/	
Address		
Postcode		
Telephone		
Email		

Please explain what happened and why you feel that you should not have to pay the Penalty Charge Notice

Please enclose copies (not originals) of any documents or other evidence you are relying on to support your challenge

Signed

Date

Please note that the registered of the owner of the vehicle is liable for the charge even if they were not driving at the time of the contravention. The owner cannot transfer liability to the driver.

Please return this form to the address below. We cannot accept verbal or telephone appeals.

An acknowledgement or decision in writing will be made within 10 working days of Parking Services receiving this challenge. If the Penalty Charge Notice is not waived, then the payment will remain at the discounted rate for a further 14 days after the decision has been made.

Bolton Council	
PO Box 434	
Bolton	
BL1 4FD	

OFFICE USE ONLY	
Action taken	
Date	
Initials	
Authorised by	

parkingservices@bolton.gov.uk

