



City of Newport

Department of Code Enforcement

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CITATION APPEAL

Name:
Address:
Email:
Phone:
Citation#:
Date Of Citation (must be within 10 days):
Property Location Cited:

If you are an IIC, incorporated company or a trust, you must be represented by an attorney at the hearing.

I APPEAL THE ABOVE CITATION ON THE FOLLOWING GROUNDS:

Date:

Signature:

STAFF ONLY DO NOT WRITE BELOW THIS LINE

I certify that a copy of the above was served to the above appellant in accordance with the City of Newport Ordinance by (1) personal delivery, or (2) leaving a copy at the address above with an adult resident who was informed of the contents; or (3) by posting a copy in a conspicuous place on the premises and mailing a copy of the citation by regular first class, certified mail, return receipt requested.

Signature of Clerk: _____ **Date:** _____