

CITY ADMINISTRATIVE HEARING PROGRAM
Request for Administrative Hearing

Name _____ **Citation Number** _____
Address: _____ **Date of Violation** _____
City, State, Zip: _____ **Time of Violation** _____
Today's Date: _____ **Issuing Agency** _____
Phone Number (____) _____ **Penalty Amount** _____

The Administrative Investigation has determined that the above violation notice was issued correctly. In accordance with California Vehicle Code Sections 40200.7 and 40215, you may request an Administrative Hearing with 21 days of the mailing date of the Result of the Administrative Investigation. In order to request an Administrative Hearing, you must pay the full amount of the parking penalty (**NO CASH**) or claim indigent and submit a written statement of the reason for contesting the parking violation.

The Administrative Hearing is your opportunity to provide defense against the facts presented on the violation notice and the result of the Administrative Investigation. You may bring written and/or photographic documentation. Material submitted will not be returned. The results of the Hearing will be mailed to the address you have provided above.

The Issuing Agency reserves the right to assign another hearing date if your choice is not available.

In order to process your request for an Administrative Hearing, the following items must be provided and selected:

_____ Review by mail **OR** _____ Appear in person

Deposit of Full Penalty Amount: _____

Location: Wednesday 1:00 p.m. – 4:00 p.m.

Redondo Beach City Hall
415 Diamond Street
Redondo Beach CA
(310) 318-0617
(Door E)

FOR OFFICE USE ONLY

In Person	<input type="checkbox"/>	Payment Received	Status: Dismissed	<input type="checkbox"/>
Mailed	<input type="checkbox"/>	Results Mailed	Upheld	<input type="checkbox"/>
		Hearing Officer	_____	
Processor	_____	Location	_____	
		Hearing Date	_____	