

Parking Citation Service Center

## **PARKING CITATION CONTEST FORM** First-Level Initial Review

**INSTRUCTIONS:** Complete Section A and Section B below, being sure to include your reason(s) for contesting the parking citation. Attach any supporting documents as evidence to your claim(s). Pursuant to California Vehicle Code (CVC) Section 40215(a), you must mail this form within twenty-one (21) calendar days from the date the citation was issued, or within fourteen (14) days from the date of the mailed Notice of Delinquent Parking Violation letter, to the following address:

C/O: Parking Citation Service Center P.O. Box 11923 Santa Ana, CA 92711

SECTION A – CONTESTER INFORMATION									
FULL NAME						PRIMARY PHONE NO.		SECONDARY PHONE NO.	
STREET ADDRESS			CITY		CITY	<u> </u>	STATE	ZIP CODE	
CITATION NUMBER			DATE CITATION ISSUED		ICENS	E PLATE NUMBER	ISSUING AG	ENCY	
						N FOR CONTE additional pages as			
			SECTI	ON C – D	ISPO	SITION OF RE	VIEW		
IF DISMISSED:	The	citation will	be dismissed, ar	id the bail w	/ill be c	ancelled. No furthe	r action is requ	ired.	
IF UPHELD:		You may re 1. Comple 2. Submit 3. Must be	ete the Administra a deposit for the completed withi	evel Admin tive Hearing pail amount n twenty-or	istrativ g Requ t of the ne (21)	e Hearing. To reque est Form, <u>available</u> citation (check or n days from the decis	online. noney order). ion of the First-	Level Initial Review. d in the above instructions.	

AGENCY USE ONLY										
DECISION BY ISSUI	NG AGENCY	INVESTIGATOR / OFFICER	REVIEW DATE	AMOUNT DUE						
				\$						
REASONING / COM	REASONING / COMMENTS									