

**HERMOSA BEACH ADMINISTRATIVE HEARING PROGRAM  
REQUEST FOR ADMINISTRATIVE HEARING – PARKING CITATION**

Name: \_\_\_\_\_ NPV/Citation # \_\_\_\_\_  
 Address: \_\_\_\_\_ Violation Date: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_ Violation Time: \_\_\_\_\_  
 Phone #: \_\_\_\_\_ Penalty Amount:\$ \_\_\_\_\_  
 Today's Date: \_\_\_\_\_ Initial Review Mail Date: \_\_\_\_\_

**PLEASE READ EACH PARAGRAPH AND ACKNOWLEDGE BY INITIALING AT THE LEFT**

\_\_\_\_\_ Initial  
 The Administrative Investigation has determined that the above violation notice was issued correctly. In accordance with California Vehicle Code Section 40215, you may request an Administrative Hearing within 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 or claim indigence (an indigence claim form must be filed)** and submit a written statement of the reason for contesting the parking violation on the Administrative Hearing Program Written Statement form. If you do not wish to add any additional information, the original statement submitted for the Administrative Investigation will serve as your version of the events surrounding the issuance of the Notice of Parking Violation.

\_\_\_\_\_ Initial  
 The Administrative Hearing is your opportunity to provide defense against the facts presented on the Notice of Parking Violation and the results of the Administrative Investigation. You may bring written and/or photographic documentation and witnesses to the hearing. Materials submitted during the Administrative Investigation will be present at the Administrative Hearing. No materials submitted will be returned. The results of the Administrative Hearing will be mailed to the address you have provided.

\_\_\_\_\_ Initial  
 Administrative Hearings for the City of Hermosa Beach are scheduled for the first Thursday of the month. Administrative Hearings are conducted BY APPOINTMENT ONLY. UNSCHEDULED CASES WILL NOT BE HEARD UNDER ANY CIRCUMSTANCES.

\_\_\_\_\_ Initial  
 If you will be unable to attend the Administrative Hearing, please contact the Cashiering department at (310) 318-0211 at least 24 hours prior to your scheduled appointment time. If you fail to appear, you will have exhausted all rights to further appeal this citation.

**CHECK ONE:**

- I PLAN ON ATTENDING THE HEARING IN PERSON**
- I PLAN ON ATTENDING THE HEARING BY PHONE**
- I WILL NOT ATTEND THE HEARING BUT WILL LET MY ORIGINAL STATEMENT AND PRIOR SUBMITTED EVIDENCE (IF APPLICABLE) ACT AS MY TESTIMONY**

**FOR OFFICE USE ONLY**

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

