

# PARKING CITATIONS ADMINISTRATIVE HEARING

Print form, complete and attach original citations(s), payment and all supporting documents.

## SECTION 1

Your Name (First, M.I., Last): \_\_\_\_\_

Address (Street Number, Street Name, City, State, Zip code): \_\_\_\_\_

### Check appropriate line:

- I request to appear in person before a Hearing Officer
- I request to have my hearing conducted based on a written statement and all relevant documents are attached

Relationship to vehicle (check one):  Registered Owner  Driver  Leasee

Citation Number: \_\_\_\_\_ Vehicle License Number: \_\_\_\_\_

Issuing Agency: City of Salinas, 200 Lincoln Avenue, Salinas, CA 93901

## SECTION 2

The above-entitled matter will be heard on \_\_\_\_\_ Time \_\_\_\_\_

Location of Hearing: Salinas Police Department, 222 Lincoln Avenue, Salinas, CA 93901

Hearing Examiner: Appointed by Data Ticket, Inc

## SECTION 3

Disposition:  LIABLE  DISMISSED

\_\_\_\_\_  
\_\_\_\_\_  
Hearing Examiner's Signature \_\_\_\_\_

## SECTION 4

Continuation: The respondent has provided evidence/reason to be granted a continuation until \_\_\_\_\_ at \_\_\_\_\_ p.m./a.m.

Return form and all relevant documents to:

Data Ticket, Inc  
Attn: Hearing Officer  
Po Box 2730  
Huntington Beach, Ca 92647