

CITY OF PASADENA

Parking Office, 100 N Garfield Ave., Room N106
Pasadena, California 91101-1509 · (626) 744-7665

Date: \_\_\_\_\_

Citation #: \_\_\_\_\_

Name: \_\_\_\_\_

Date of Violation: \_\_\_\_\_

Address: \_\_\_\_\_

Registered Owner? Y/N

City, State, Zip: \_\_\_\_\_

Penalty Amount \$ \_\_\_\_\_

In accordance with California Vehicle Code Section 40200 and 40215, you have 21 days from the date the violation notice was issued, or 14 days from the mailing of the Delinquent Notice of Parking Violation to submit a request for an Initial Review. Please provide a written statement why you believe the Parking Violation Notice was issued in error. Include any material (e.g. receipts, pictures, etc.) to support your statement. Materials submitted for review will not be returned. Please print your statement in the space provided below.

Multiple horizontal lines for writing a statement.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_ EMAIL: \_\_\_\_\_

The results of the Initial Review will be mailed to the address you provided above.

FOR OFFICE USE ONLY

REQUEST FOR INVESTIGATION Investigated by: \_\_\_\_\_ Date: \_\_\_\_\_

Results: \_\_\_\_\_

Date of Review: \_\_\_\_\_

Status:

In Person  Approved by: \_\_\_\_\_

Dismissed

Mailed In  Reviewed by: \_\_\_\_\_

Upheld