



## REQUEST FOR ADMINISTRATIVE HEARING

This is a request for an administrative hearing to contest a citation you have received. You **MUST** do the following:

1. Complete the "Request for Administrative Hearing" form and return it to City of Artesia, c/o Citation Processing Center, PO Box 7275, California 93658-7275.
2. Provide one of the following when submitting your application:
  - a. Pay entire amount of citation.
  - b. Submit a completed "Hardship Waiver" form and provide all documentation necessary.
3. File this application no later than thirty (21) days from the date of service of the citation.

Only after the request is filed and the Responsible Person requesting the hearing has: 1) paid the administrative fine in full or 2) obtained City approval of a Hardship Waiver, shall the City set a hearing date and time. The hearing shall be conducted within (60) days after the request for hearing form is filed and the civil and/or administrative fine is deposited with the City or an advance Hardship Waiver is issued. The City shall send notice of the date, time and place of the hearing to the Responsible Person requesting the hearing via certified mail return receipt at least ten (10) days before the date of the hearing. Fines paid for citations that are rescinded will be refunded.

AMC 1-7.08(b) A failure to timely contest the administrative citation, including failure to deposit the fine at the time of filing the request for hearing, shall be deemed a waiver of the right to appeal and to seek judicial review.

<b>Citation #:</b> _____ <b>Amount of Citation (Administrative Fine):</b> \$ _____
<b>Name of Responsible Person:</b> _____
<b>Address of violation:</b> _____
<b>Date of Citation:</b> _____ <b>Citation issued by:</b> _____
<b>Mailing Address (if different from above)</b>
<b>Address:</b> _____
<b>Contact telephone number:</b> _____
<b>Please present evidence or a compelling reason why an administrative hearing should be held:</b>
_____
_____
_____
<b>Signature:</b> _____ <b>Date:</b> _____
<b>OFFICE USE ONLY</b>
Criteria 1, 2, and 3 have been met? <input type="checkbox"/> YES <input type="checkbox"/> NO
Application accepted by: _____ Date: _____
<b>REQUEST FOR HEARING:</b> <input type="checkbox"/> GRANTED <input type="checkbox"/> DENIED