



## ADMINISTRATIVE CITATION HARDSHIP WAIVER

This is a request for a Hardship Waiver of the advance deposit of the administrative fine and/or hearing fee.  
You MUST do the following:

1. Complete the "Administrative Citation Hardship Waiver" form and file it together with your "Request for Administrative Hearing" form.
2. Return it to City of Artesia, c/o Citation Processing Center, PO Box 7275, California 93658-7275.
3. Attach required financial documentation demonstrating your inability to deposit the fine and/or hearing fee.

AMC Section 1-7.09 Any person who is financially unable to make the required advance deposit of the administrative fine or hearing fee may request an Advance Deposit Hardship Waiver. A completed Hardship Waiver Form must be filed together with the Request for Administrative Hearing within twenty-one (21) calendar days from the date the administrative citation is served.

The Hardship Waiver Form, the hearing request, and all required supporting documents must be filed with the Office of the City Clerk at Artesia City Hall, 18747 Clarkdale Avenue, Artesia, California 90701.

<p><b>Name of Citation Recipient:</b> _____</p> <p><b>Address:</b> _____</p> <p><b>Citation #:</b> _____ <b>Amount of Citation (Administrative Fine):</b> \$ _____</p> <p><b>Date of Citation:</b> _____</p> <p><b>Mailing Address (if different from above)</b></p> <p><b>Address:</b> _____</p> <p><b>Contact telephone number:</b> _____</p> <p><b>DECLARATION</b></p> <p>I have attached copies of all supporting documents that demonstrate the financial hardship I would experience by depositing the administrative fine and/or hearing fee. Supporting documents may include, without limitation, complete State and Federal income tax returns for the prior tax year, financial statements, loan applications, bank account records, and income and expense records for the past twelve (12) months. Nonprofit organizations must also provide their articles of incorporation.</p> <p>I understand that the City will review my request and issue a written decision by mail, and that if my Hardship Waiver is denied, I must pay the full fine and hearing fee within seven (7) calendar days or my hearing request will be considered incomplete, and the citation will become final.</p> <p>I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Executed on _____, 20____, at _____, California.</p> <p><b>Signature:</b> _____ <b>Date:</b> _____</p>
<p><b>OFFICE USE ONLY</b></p> <p>Hardship Waiver Determination:</p> <p><input type="checkbox"/> APPROVED</p> <p><input type="checkbox"/> DENIED (Reason): _____</p> <p>Reviewed by: _____ Date: _____</p>