



Parking Services Division
P.O. Box 151560
San Rafael, CA 94915-1560

REQUEST FOR INITIAL REVIEW

The initial review process is provided pursuant to AB408, effective July 1, 1993. It is the responsibility of the person requesting the review to comply with the procedures and time limits specified below. The purpose of this review is to determine if the alleged violation occurred.

Form with fields: CITATION NO:, DATE ISSUED:, NAME:, LICENSE PLATE #:, MAILING ADDRESS:, CITY, STATE, ZIP, DAYTIME TELEPHONE:, EVENING TELEPHONE:

Reason for requesting an initial review. Please explain your reason for believing this citation was issued in error or why you are not responsible for the alleged violation. Please be as detailed as possible in your explanation. NOTICE: This initial review must be requested within 21 days of the issuance of the parking citation or 14 days from the mailing of the notice of delinquent parking violation or your option for review will expire.

Form with checkboxes: Meter Jamed, Out of Order, Timer Off (Fast/Slow), Registers Improperly, Does Not Register, Will Not Take Coin, EXPIRED Stays On, Disabled Parking Permit, Other (Please explain below)

Series of horizontal lines for writing the reason for requesting an initial review.

Signature:

Date: