



City of La Puente

15900 Main Street La Puente CA 91744

Telephone: (626) 855-1500

Fax: (626) 961-4626

Administrative Citation Hearing Request

In order to contest an Administrative Citation the contestant **MUST** file on or before the thirtieth (30) day from the issuance day. The contestant **MUST** complete and file this "Hearing Request Form" and **MUST** either deposit the full amount of the penalty or request for a Hardship Waiver Form when you are not able to pay for the citation and submit all proof of income and expenses, pursuant to Section 1.12.090 of the La Puente Municipal Code.

If the Contestant does not request an Administrative Hearing and make the payment as set forth above, the contestant may be held **LIABLE** for any and all regularly assessed late penalties and administrative fees.

The contestant must complete the following information for each Administrative Citation being appealed and/or attach legible photocopies of each said citation.

I request an Administrative hearing for the following reasons:

(If more space is required, use the back of this form)

I, _____, declare under penalty of perjury that the above statement is true and correct to the best of my knowledge.

Signature: _____ Date: _____

OWNER'S INFORMATION

First Name: _____ Last Name: _____

Mailing Address : _____

Phone No.: _____ Business No.: _____

CA Driver's License No.: _____ Expiration Date: _____

CITY STAFF USE ONLY

Date of Filing: _____ Received for Filing by: _____