CITY OF PASADENA – PARKING CITATION SECTION

REQUEST FOR HEARING BY WRITTEN DECLARATION

Please Print or Type and Attach Additional Sheets if Necessary
This form or your affidavit should be mailed to: The City of Pasadena, Parking Citation Section,
221 East Walnut Street, Suite 199, Pasadena, CA 91101

Name:	Parking Ticket No			
Address:	City/State:	Zip Code:		
If you wish to further contest the mail date on the review out	arough the administrative hearing process you come notice and you have paid the amount d e your case is forwarded to the hearing office	eview upheld notice for the above parking ticket. u may do so in person or by mail within 15 days of ue for the parking ticket. Full payment of the er. Completing this form indicates that you are		
your statement beginning with perjury under the laws of the S	the facts pertaining to the case. Your declara-	ng by written declaration) declare and then begin ation should end with "I declare under penalty of and correct by (name) on (date) at (city and state) se used to substitute the written declaration.		
I certify that I have read and ur my hearing by means of a wr		the right to an in-person hearing and elect to have		
Signature		Date		
	WRITTEN DECLARA	TION		
I,	declare as follows:			
Signature	City and State whe	ere signed		
I,	declare as follows:			
UNDER PENALTY AND PE	CRJURY, I DECLARE THAT THE FORE	EGOING IS TURE AND CORRECT		
Signature	City and State Where	Signed		
I have attached supportive doc submitted will be retained by the	umentation () YES () NO. If yes, please City of Pasadena.	se list attached documents. All documents		
1	2			
3	4			
5.	6.			