



CITY OF RANCHO PALOS VERDES

COMMUNITY DEVELOPMENT DEPARTMENT

1.16.130 - REQUEST FOR ADMINISTRATIVE HEARING

ADMINISTRATIVE HEARING CITATION CONTEST FORM

NOTICE TO CONTESTANT

The contestant is responsible for the timely filing of the appeal to request a hearing. The Request for Administrative Hearing form must be completed in its entirety and returned to the Community Development Department of City Hall within 30 days from the date of service of the administrative citation. **A separate Request for Administrative Hearing form is required for each citation.**

An advance deposit of the total administrative fine for each citation is required at the time of filing. Payment may be in the form of Cash, Check, Cashier's Check, or Money Order payable to the City of Rancho Palos Verdes. The advance administrative fine deposit shall be refunded if the ruling made by the Hearing Officer rules there was no violation as charged in the Administrative Citation.

Any responsible person who requests a hearing to contest an administrative citation and who is financially unable to deposit the administrative fine required in [Section 1.16.120](#) (Payment of Administrative Fine) may file a request for an advance deposit hardship waiver.

INSTRUCTIONS: Complete this form if you are contesting the issuance of an administrative citation regarding the violation(s) of the Rancho Palos Verdes Municipal Code.

CONTESTANT NAME: _____

ADDRESS: _____ (STREET) _____ (CITY) _____ (STATE) _____ (ZIP)

TELEPHONE #: _____ CELL #: _____ WORK #: _____

EMAIL: _____

The contestant hereby contests to the City of Rancho Palos Verdes the decision to administer administrative citation:

Citation #: _____ \$ _____ Issued on: _____ Case #: _____
(FINE AMOUNT) (DATE)

Violating Address: _____ (STREET) _____ (CITY) _____ (STATE) _____ (ZIP)
RANCHO PALOS VERDES, CA 90275

State reasons for contesting the above citation: _____

Attach a statement for the request to contest the citation and any documents to support your claim.

I hereby request an administrative hearing and declare under penalty and perjury that the information provided is true and correct to the best of my knowledge. I have attached the required statement and any supporting documents and paid the advance deposit or attached the hardship fee waiver deposit application.

Print Name: _____

Signature: _____ Date: _____

FOR CITY USE ONLY

Received by: _____ Date: _____

An administrative hearing will be held on the date and time shown below:

Date	Time	Location	Hearing Officer	Issuing Officer