

**CITY OF HERMOSA BEACH**  
**REQUEST FOR ADMINISTRATIVE REVIEW**

Citation#: \_\_\_\_\_

License Plate#: \_\_\_\_\_

Name: \_\_\_\_\_

Date of Violation: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Time of Violation: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Penalty Amount: \_\_\_\_\_

In accordance with California Vehicle Code Section 40215, you have **21** days from the date the citation was issued or **14** days from the mailing date of the Delinquent Notice of Parking Violation to submit a request for an Administrative Investigation. Please provide a written or typed statement in the space provided (attach additional sheets if necessary) as to why you feel the citation was issued in error. Include any documents/materials (e.g. receipts, pictures, etc.) to support your claim. **If you paid a meter/space using a credit card, for verification purposes please include the first six (6) and last four (4) numbers of the card (Visa/Master Card) used and submit a banking statement showing a debit. All documentation/materials MUST be submitted with the Administrative Review form. Documents/materials submitted for review will not be returned.**

[illegible]

Signature

Date \_\_\_\_\_

Email

**Please mail this form to:**  
**HERMOSA BEACH CITATION PROCESSING**  
**PO BOX 2081**  
**TUSTIN CA 92781**