



City of Beaumont

REQUEST FOR ADMINISTRATIVE APPEAL HEARING

RETAIN A COPY OF THIS ORIGINAL FORM AND SUBMIT ONE FOR REVIEW

This Request for Administrative Appeal Hearing must be postmarked before the deadline for correction specified on the citation.

An advance deposit of the fine must also be filed with the Request for Hearing to be considered a complete and valid request for appeal.

In order for your request to be processed, the following information must be provided and will not be returned:

- Complete one Administrative Appeal Hearing form for **each** citation.
- Write or print legibly. Use a ballpoint pen.
- Include a copy of the Original Citation or the Notice of Violation.
- Submit an advance deposit of the fine amount for each citation you are appealing.
- Attach any photographs and/or any other supporting documentation that will assist the City in reviewing your citation.

Citation # _____ Code Sections Violated: _____

Date and Time Issued: _____

Location/Violation Address: _____

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Daytime Phone Number (_____) _____ Number of Violations on this Citation (1, 2, or 3):

The reason(s) I am contesting this citation is/are (attach additional pages as necessary):

I certify that the foregoing is true and correct.

Signature: _____ Date: _____

The City will issue you a written notice of hearing setting forth the date, time, and place at least ten calendar days prior to the date of the hearing. If you fail to appear at the hearing it shall constitute a forfeiture of the Citation fine and shall be deemed to have waived the right to a hearing, the adjudication of the issues related to the hearing, any and all rights afforded under Chapter 1, Section 1.17.140 of the Beaumont Municipal Code.

Mail to: **Adjudication Processing**
City of Beaumont
PO Box 3926
Tustin, CA 92781-3926

CITY USE ONLY:	Violation 1 Amt Due: _____
NOTES ON BACK: <input type="checkbox"/>	Violation 2 Amt Due: _____
DISP CODE:	Violation 3 Amt Due: _____
<input type="text"/>	Total Amt Due: <input type="text"/>
DATE: _____	BY: _____