



## REQUEST FOR WAIVER OF PENALTY DEPOSIT

**NAME:**

**CITATION:**

I hereby request a waiver of parking penalty deposit based upon an inability to pay the amount due and that the hearing proceed on my citation for the following reasons:

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**Please complete the following:**

**1. EMPLOYMENT**  
(Check all that apply)

- ☐ Employed  
☐ Full-time  
☐ Part-time  
☐ Unemployed  
☐ Disabled  
☐ Student  
☐ Homemaker  
☐ Military  
☐ Other \_\_\_\_\_

**2. SUPPORTED BY:**  
(Check all that apply)

- ☐ Self  
☐ Spouse  
☐ Parents  
☐ Welfare  
☐ S.S.I.  
☐ A.D.C.  
☐ Unemployment Compensation  
☐ Other \_\_\_\_\_

**3. PERSONS SUPPORTED:**  
(Check all that apply)

- ☐ Self  
☐ Spouse  
☐ Children (# of) \_\_\_\_\_  
☐ Other \_\_\_\_\_  
**TOTAL** \_\_\_\_\_

4. Your Net Income (take home pay, welfare, etc): \$ \_\_\_\_\_ every \_\_\_\_\_ days.

5. If Unemployed; months of unemployment: \_\_\_\_\_ Occupation: \_\_\_\_\_

**6. ASSETS (Value)**

Motor Vehicle(s) \$ \_\_\_\_\_  
 Home \$ \_\_\_\_\_  
 Property \$ \_\_\_\_\_  
 Saving Account(s) \$ \_\_\_\_\_  
 Checking Account(s) \$ \_\_\_\_\_  
 Cash on Hand \$ \_\_\_\_\_  
 All Other \$ \_\_\_\_\_

**TOTAL ASSETS** \$ \_\_\_\_\_

**7. MONTHLY EXPENSES**

Rent/Mortgage \$ \_\_\_\_\_  
 Utilities \$ \_\_\_\_\_  
 Loans/ Credit Cards \$ \_\_\_\_\_  
 Food/ Clothes \$ \_\_\_\_\_  
 Transportation \$ \_\_\_\_\_  
 Medical/ Dental \$ \_\_\_\_\_  
 All Other \$ \_\_\_\_\_

**TOTAL EXPENSES** \$ \_\_\_\_\_

8. If a penalty is imposed, how much could you afford to pay each month? \$ \_\_\_\_\_

9. Attach documents verifying assets, monthly income and expenses.

I declare under penalty of perjury that the foregoing is true and correct.

Executed at \_\_\_\_\_, \_\_\_\_\_ on \_\_\_\_\_, 20\_\_\_\_.  
 CITY STATE MONTH DAY YEAR

**CONTESTANT SIGNATURE:** \_\_\_\_\_

**FOR CSUN USE ONLY:**

Waiver of Penalty Deposit: ☐ Granted ☐ Denied