CITY OF MENLO PARK

REQUEST FOR PARKING CITATION PAYMENT PLAN

• Payment Plans are only available to the registered owner of the vehicle that was cited.

Mail Completed Application To:
Menlo Park Police Department - Records
701 Laurel Street, Menlo Park CA 94025

Please check which Payment Plan you are requesting:

LOW INCOME PLAN		STANDARD PLAN	
Contingent on low income status verification.	Processing fee for a standard		
Deadline to apply: within 120 days of cita after administrative hearing determination	- I	payment plan is \$25.	
• \$5 processing fee must be included with t to the payment plan amount, at the optio			
 Delinquent fines and penalty assessments income plan is approved but are reinsta falls out of compliance with payment plan 	ted if registered owner		
 For one time only, citations may be remo added to a payment plan. A \$5 fee will ap 			
Name:			
treet Address:			
ity:	State:	Zip:	
hone:	Email:	Email:	
Citation No(s):			
equest to pay the processing fee (Check NOT INDICATED, FEE WILL BE INCLUDED WITH F	· —	Payment Added to Plan	
igree to make monthly payments until the payment schedule all fees and delinquent permaining becomes due immediately, and a D	enalties that were previous	ly waived will be reapplied, the full amo	
citations on vehicles that are currently bound to have been willfully fraudulent, his or fines and fees shall be restored. I understar	poted or towed. Per CVC 4 her fines and fees reduction	10220. — If a defendant's indigent statuon shall be overturned and the full amo	

LOW-INCOME VERIFICATION

Qualifications

To qualify for the Low-Income payment plan, you must meet one of the two following conditions

1) Your monthly income must be less than the following income limit:

Household Size (Check One)	Gross Annual Income Limit
☐ Individual	\$16,987
☐ Family of 2	\$22,887
☐ Family of 3	\$28,787
☐ Family of 4	\$34,687
☐ Family of 5	\$40,587
☐ Family of 6	\$46,487

Add \$5,900 for each additional household member above six.

2) You receive public benefits from any of the following programs

Supplemental Security Income	Cash Assistance Program for	Supplemental Nutrition
(SSI) and State Supplementary	Aged, Blind, and Disabled Legal	Assistance Program
Payment (SSP)	Immigrants (CAPI)	
County Relief, General Relief,	California Food Assistance	In-Home Supportive
or General Assistance	Program	Services (IHSS)
Tribal TANF grant	Medi-Cal	CalWorks

Documentation

Please provide a copy of either of the following to verify you meet one of the above conditions. Indigent determination cannot be made without supporting documentation.

- A. Proof of income from a pay stub or another form of proof of earning, such as a bank statement that shows that the income criteria as listed above is met. Incomplete documentation will result in denial of payment plan.
- B. Proof of receipt of benefits from one of the programs listed under Section 2 of the Qualifications.

Confirm Registered Owner	Office Use		
	Confirm Registered Owner		
No. 10 and 10 an	Low Income Documentation Included	□Yes	□No
Approved: Date:	Approved:		Date: