

**LOS ANGELES TRADE-TECHNICAL COLLEGE
PARKING ADMINISTRATION
(REQUEST FOR VIOLATION REVIEW)**

NAME _____ DATE _____

ADDRESS _____ PHONE # _____

CITY _____ CITATION# _____ OFFICER ID # _____

ISSUED DATE _____ VIOLATION CODE _____ VEHICLE LICENSE # _____

REASON FOR REVIEW: _____

AT THE TIME OF THE CITATION, I WAS: Please check appropriate box.

STUDENT **EMPLOYEE** LATTTC PERMIT # _____

VISITOR

ADMINISTRATIVE REVIEW:

Comments _____

Your request has been approved and the citation will be dismissed.

Reviewed by _____ Date _____

Your request has been denied, the penalty must be paid. Failure to do so may result in late charges and withholding of your vehicle registration until such fees are paid. Send penalty with a copy of this form to: Parking Citation Service Center, P.O. Box 11923 Santa Ana, CA 92711-1923.

Reviewed by _____ Date _____

SECOND VIOLATOR APPEAL:

Should you wish to appeal this review, check this box and return this form **ALONG WITH A CHECK OR MONEY ORDER IN THE AMOUNT OF PENALTY WITHIN 15 days** of receipt of this notice. Upon receipt of this form and the Hearing Examiner's ruling, **YOU MAY APPEAR FOR YOUR HEARING IN PERSON OR YOU MAY SEND WRITTEN DECLARATION.** Please check the appropriate box.

I wish to appear in person.

I wish to submit a written declaration (no appearance necessary)

If you check the box to submit written declaration, attach to this form our explanation of the reason you wish to further contest your citation.

FOR OFFICE USE ONLY: HEARING EXAMINER REVIEW

Hearing Time: _____ Hearing Date _____

Hearing Examiner: _____

DISPOSITION: Citation upheld _____ Citation dismissed _____

Explanation: _____

****PLEASE NOTE: CITATIONS WILL NOT BE RECOMMENDED FOR DISMISSAL FOR A LOST OR FORGOTTEN PERMIT, LACK OF KNOWLEDGE OF LAWS AND REGULATIONS AND/OR FAILURE TO SEE POSTED SIGNS.** Revised 4/12/05