



NOTICE OF APPEAL OF ADMINISTRATIVE CITATION

CITY OF BRISBANE
50 Park Place, Brisbane, CA 94005
(415) 508-2120

Any recipient of an administrative citation who desires to contest that a violation has occurred or that the recipient is the party responsible for committing the violation may, **within ten (10) calendar days from the date that service of the administrative citation was completed**, file a Notice of Appeal with the City Clerk for the matter to be heard by a hearing officer. This completed form, timely filed and accompanied by either an advance deposit of the Administrative Fine or a completed Application for Advance Deposit Hardship Waiver, shall serve as your written Notice of Appeal. You will be notified of the time and place of the hearing.

APPELLANT INFORMATION:

Name: _____

Mailing Address: _____

Phone: Work: _____ Home: _____ Cell: _____

ADMINISTRATIVE CITATION:

Citation Number: _____ Date Issued: _____ Copy Attached

GROUNDS FOR APPEAL: Provide a brief statement in ordinary and concise language of the specific items protested, together with the material facts claimed to support your contentions. Provide and reference an attachment if additional space is needed or other documents are being submitted in support of your appeal.

STATEMENT OF RELIEF SOUGHT: Provide a brief statement in ordinary and concise language of the relief you seek to obtain in this appeal and the reasons why the Administrative Citation should be rescinded, modified, or otherwise set aside. Provide and reference an attachment if additional space is needed.

ADMINISTRATIVE FINE: This Notice of Appeal must be accompanied by either an advance deposit of the Administrative Fine indicated on your citation or a completed Application For Advance Deposit Hardship Waiver. The Application for Advance Deposit Hardship Waiver may be obtained from the City Clerk or may be downloaded from the City's website at <http://brisbaneca.org>. Please indicate either of the following:

- Administrative Fine Deposited: \$ _____
- Application for Advance Deposit Hardship Waiver submitted.

Date: _____

Signature