PARKING TICKET REVIEW

Name: _____ Date: _____

Address: _____

Telephone: _____ (Cell) _____

Email: _____

Issued Date: _____ License Plate: _____

Time Issued: _____ Ticket #: _____

Violation: _____

Reason you believe this citation should be reviewed:

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

For office use only

Review: Excused_____ Denied_____

If denied, reason for denial:

_____
_____
_____
_____

211 2nd STREET · HOOD RIVER, OR 97031 · Phone (541)386-1488 · Fax 541)387-5289

Dear Citizen:

If you feel you have been issued a parking ticket due to a **meter malfunction**, you may contest it through an administrative review process, by filling out a Parking Ticket Review Form within 2 business days of ticket issuance date. **Tickets will not be excused for errors made by the violators**. Examples such as putting money in the wrong meter, getting change for the meter, just ran in for "a second" or I didn't think I had to pay. ***A TICKET WILL NOT BE REVIEWED WITHOUT A COMPLETED PARKING TICKET REVIEW FORM OR IF THE FORM IS SUBMITTED AFTER THE 2nd BUSINESS DAY FROM TICKET ISSUANCE DATE.*** *During this review, no additional penalties accumulate.*

Please submit the Parking Ticket Review Form to the City Administration office. The City will review the form and provide a response, in most cases, within 5 days of the date the form was received. You will be notified of the City's decision by mail, email or telephone. If the ticket has been excused, just dispose of it. If the review has been denied, the ticket will proceed through the process as it first issued, with the issuance date being the date of the City's decision.

If you are not satisfied with the City's decision, you may seek further review by the Municipal Court Judge. Please contact the Hood River Municipal court clerk to request a hearing at (541)386-3942. ***The ticket will accumulate additional fines or penalties during this time and original parking ticket must be present in court.***

I have read the Parking Ticket Review process described above.
I understand that I will be responsible for the ticket if the review is denied.

Signature_____

Printed Name_____