

CITY OF OREGON
REQUEST FOR PARKING CITATION ADMINISTRATIVE REVIEW
(ONLY FOR USE IF WITHIN 10 DAY PAY PERIOD)

PARKING TICKET# _____ **CITATION ISSUE DATE:** _____

This is a request for review of a local ordinance citation and does not mean the citation will be voided or not processed in the event my request is denied. I have indicated below the circumstances I feel should be brought to the attention of the officer and I am requesting this citation be voided based on those circumstances.

COMPLAINANT MUST RETAIN THE CITATION DURING THE REVIEW PROCESS

NAME _____ **PHONE** _____

EMAIL ADDRESS: _____

ADDRESS _____ **CITY** _____ **STATE** _____ **ZIP** _____

OFFICER'S STAR # _____ **VIOLATION** _____

COMPLAINANT'S STATEMENT OF CIRCUMSTANCES (USE REVERSE IF NEEDED)

SIGNATURE **X** _____ **DATE** **X** _____

OFFICE USE ONLY BELOW:

RECORDS PLACED IN REVIEW: _____ (Date) **REVIEW COMPLETED** _____ (Date)

____ **CITATION MAY BE VOIDED BASED ON THE CIRCUMSTANCES**

____ **CITATION TO REMAIN IN FORCE, REQUIRING PAYMENT OR COURT APPEARANCE**

OFFICER'S SIGNATURE _____ **DATE** _____

OFFICER'S COMMENTS: _____

Your request for review has been completed and the final disposition is indicated below:

____ **Request has been approved and the CITATION WILL BE VOIDED.**

____ **CITATION TO REMAIN IN FORCE requiring full payment within 10 days of the date below OR you may request a Circuit Court Hearing in person at the Oregon Police Department. Your court date will be assigned at that time.**

SIGNATURE _____ **DATE** _____

Chief of Police

TO: _____

Citation # P _____