TAPS
Transportation and Parking Services

Adjudication Department
Facilities Building A
5200 N. Lake Road
Merced, CA 95343
(209) 228-2483

REQUEST FOR ADMINISTRATIVE HEARING – Level 2 Appeal

This form is for those contesting citations upheld at the Level 1, Administrative Review. The request for an Administrative Hearing must be received within 21 calendar days of the mailing date on the Level 1 Determination Letter.

California Vehicle Code 40215(6) requires that the person requesting an administrative hearing deposit the amount of the parking penalty at the time the Administrative Hearing is requested. If the citation is dismissed, a refund will be issued.

PLEASE PRINT CLEARLY & LEGIBLY	
Name:	Phone Number:
Mailing Address	City, State, Zip
Email Address:	

Complete one request form for each citation.

Citation Number:	Vehicle License Plate:

The disposition of this appeal request will be mailed to the address listed on this form. Call our office within 21 days of the filing date if you have questions about the status of your appeal.

HEARING TYPE: ☐ Personal Conference/Telephone Hearing ☐ Written Declaration

***If you choose a Written Declaration, please complete a Written Declaration form and return it with this request. (Page 3)**

Please note that non-English speaking respondents are responsible for providing their own translator for the hearing

Hearing Deposit can be paid via cash, check, Cat Card, money order or cashier's check, at Transportation and Parking Services. Do not mail cash.

To request an Administrative Hearing without payment of the parking penalty, a fee waiver request form must be completed and returned prior to the administrative hearing request deadline. Upon satisfactory proof of inability to pay and approved by a Parking Adjudication Official, an Administrative Hearing will be scheduled. Contact Parking Adjudication for more information. Completing the fee waiver request DOES NOT guarantee that the request will be approved.

For Office Use Only Below This Line

HEARING DEPOSIT $ _____

☐ **Cash** ☐ **Check** ☐ **Credit Card** ☐ **Cat Card**

DATE RECEIVED - Initials

TransAct Transaction Number: _____

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ADMINISTRATIVE HEARING INFORMATION – Level 2 Appeal

PERSONAL CONFERENCE/TELEPHONE HEARING	WRITTEN DECLARATION
A personal conference requires the following: 1. The requestor must complete the form entitled **REQUEST FOR ADMINISTRATIVE HEARING.** 2. These two forms must be received by Transportation and Parking Services by the close of business on the 21st calendar day from the mailing date on the Administrative Review Level 1 Determination Letter. 3. The administrative hearing deposit in the amount of the original parking penalty must be paid in full at the time the forms are submitted to Transportation and Parking Services. Cash, check, money order and cashier's checks are accepted. The personal conference will be scheduled within 90 days of the request date. The requestor will be notified via U.S. mail as to the date, time and location of the hearing. The requestor has the right to reschedule the hearing one time by contacting Transportation and Parking Services 72 hours before the scheduled hearing time. Should the requestor not be able to attend the second scheduled hearing, the Administrative Hearing request is cancelled, and the citation payment is retained by Transportation and Parking Services. I have read and understand the conditions outlined above and have received a copy of this form. _____ Requestor Signature _____ Date	**A written declaration the following:** 1. The requestor must complete the form entitled **REQUEST FOR ADMINISTRATIVE HEARING.** 2. The requestor must complete the form entitled **ADMINISTRATIVE HEARING LEVEL 2 APPEAL – WRITTEN DECLARATION.** 3. These two forms must be received by Transportation and Parking Services by the close of business on the 21st calendar day from the mailing date on the Administrative Review Level 1 Determination Letter. 4. The administrative hearing deposit in the amount of the original parking penalty must be paid in full at the time the forms are submitted to Transportation and Parking Services. Cash, check, money order and cashier's checks are accepted. The written declaration will be reviewed by the mediator within 90 days of the request date. The requestor will be notified via U.S. mail as to the outcome of the Administrative Hearing. I have read and understand the conditions outlined above and have received a copy of this form. _____ Requestor Signature _____ Date

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ADMINISTRATIVE HEARING – Level 2 Appeal-WRITTEN DECLARATION

Complete this form only if WRITTEN DECLARATION hearing type is chosen. Complete one request form for each citation.

The statement below will be reviewed by a qualified hearing examiner. A determination letter will be mailed to the address you provide on the **REQUEST FOR ADMINISTRATIVE HEARING** form.

PLEASE PRINT CLEARLY & LEGIBLY	
CITATION NUMBER:	VEHICLE PLATE NUMBER:

Explain the reasons you believe the citation should be dismissed. Provide any additional information or evidence that will support your case.

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I attest under penalty of perjury that all information provided by me in this document is true and accurate.

Signature: _____ Date: _____

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