

# YREKA POLICE DEPARTMENT



## Parking Citation Appeals Process

The following guidelines will be followed for persons wishing to appeal a Yreka Police Department parking citation. In all cases, where the contesting person does not satisfy the time limits, the citation and/or previous decisions become final.

### Step 1.

The contesting person must complete a Request For Administrative Review form. This form may be obtained at YPD or City Hall. The form must be filed with the Police Department within 21 calendar days of issuance of the citation, or within 10 calendar days of mailing of the delinquent violator notice. The form must be completed in full and returned to the Police Department within the time allotted. A post mark within the time allotted will be accepted.

The Administrative Reviewing Officer will review the contesting party's appeal and render a decision. His/her decision will be either: 1) Liable, or 2) Not liable, the contesting person will be notified in writing of the decision and of any additional rights to appeal (if applicable).

### Step 2.

If the contesting person is not satisfied with the Administrative Review Officer's decision, he/she may request an Administrative Hearing form. This form may also be obtained at YPD or City Hall. The form must be filed with the City Clerk within 10 days of mailing of the Administrative Reviewing Officer's decision.

The contesting person must indicate on the form whether he/she wishes a written hearing or a personal appearance hearing.

The contesting person must pay the fine, in full, to the City of Yreka at the time he/she files the request for the hearing (This fine will be refunded if he/she is found to be "Not Liable").

If the contesting person wishes a written hearing, he/she must submit a Written Hearing Statement form to the City Clerk of the City of Yreka. The information on the statement form will be forwarded to the hearing examiner.

## Appeals Process Continued –

If the contesting person wishes a personal appearance hearing with the hearing examiner, then the City Manager will schedule such hearing within 10 calendar days from the date the request is filed.

The Hearing Examiner will make a decision based on all information submitted by both parties. Notification will be made by mail, normally within 5 days of the hearing.

### Step 3 Final

If the contesting person is not satisfied with the Hearing Examiner's decision, he/she may file an appeal with the Siskiyou County Superior Court. This appeal must be filed within 20 days of the mailing of the Hearing Examiner's decision.

The contesting party is responsible for the filing costs. (A non-refundable \$25.00 filing fee made payable to the Siskiyou County Superior Court). If the court rules in favor of the contesting person, the City of Yreka will refund the court filing costs along with any fines dismissed by the court.

The Court's decision will be final.

# YREKA POLICE DEPARTMENT



## REQUEST FOR ADMINISTRATIVE REVIEW

### IMPORTANT – READ

IF YOU WISH YOUR PARKING CITATION TO BE REVIEWED BY THE ADMINISTRATIVE REVIEW OFFICER, YOU MUST COMPLETE THE ENTIRE FORM AND FILE IT WITH THE YREKA POLICE DEPARTMENT – 412 W. MINER STREET, YREKA, CA. 96097 – BEFORE THE END OF THE TIME LIMIT (EITHER 21 DAYS FROM ISSUANCE OR 10 DAYS FROM MAILING OF DELINQUENT NOTICE).

|                 |      |
|-----------------|------|
| CITATION NUMBER |      |
| DATE ISSUED     |      |
| ISSUING OFFICER | I.D. |

|                            |       |          |
|----------------------------|-------|----------|
| REGISTERED OWNER OF RECORD |       |          |
| ADDRESS ON FILE            |       |          |
| CITY                       | STATE | ZIP CODE |

PLEASE DESCRIBE IN DETAIL THE REASON YOU FEEL YOUR PARKING CITATION SHOULD BE REVIEWED.

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USE ADDITIONAL SHEETS IF NECESSARY

SIGNATURE

ADDRESS

PLEASE PRINT FULL NAME

CITY

STATE

ZIP

PHONE NUMBER

# YREKA POLICE DEPARTMENT



## REQUEST FOR ADMINISTRATIVE HEARING

### IMPORTANT – READ

IF YOU WISH TO FURTHER APPEAL YOUR PARKING CITATION, YOU MUST COMPLETE THE ENTIRE FORM AND FILE IT WITH THE CITY CLERK – CITY OF YREKA, 701 FOURTH STREET, YREKA, CA. 96097 WITHIN 10 CALENDAR DAYS FROM THE ADMINISTRATIVE REVIEW.

|                 |      |
|-----------------|------|
| CITATION NUMBER |      |
| DATE ISSUED     |      |
| ISSUING OFFICER | I.D. |

|                            |       |          |
|----------------------------|-------|----------|
| REGISTERED OWNER OF RECORD |       |          |
| ADDRESS ON FILE            |       |          |
| CITY                       | STATE | ZIP CODE |

I WOULD LIKE TO APPEAL MY PARKING CITATION BY:

\_\_\_\_\_ WRITTEN DECLARATION - I HAVE PAID THE FINE AND ATTACHED MY WRITTEN DECLARATION STATEMENT. I UNDERSTAND THAT IF I AM FOUND NOT LIABLE, THE CITY WILL REFUND THE FINE I HAVE PAID.

\_\_\_\_\_ APPEARING IN PERSON - I HAVE PAID THE FINE AND AGREE TO APPEAR BEFORE THE HEARING EXAMINER ON THE DATE AND TIME GIVEN TO ME BY THE CITY CLERK OF THE CITY OF YREKA. I UNDERSTAND THAT IF I AM FOUND NOT LIABLE THE CITY WILL REFUND THE FINE I HAVE PAID.

NOTE: YOU MUST PRESENT YOUR CASE AT THE HEARING OR IN YOUR WRITTEN STATEMENT. THE HEARING OFFICER CAN ONLY RENDER A DECISION ON INFORMATION GIVEN TO HIM BY YOU, ANY WITNESSES AND THE ISSUING OFFICER.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
PLEASE PRINT FULL NAME

\_\_\_\_\_  
CITY

\_\_\_\_\_  
STATE

\_\_\_\_\_  
ZIP

\_\_\_\_\_  
PHONE NUMBER

