## MONTCLAIR POLICE DEPARTMENT

4870 Arrow Highway, Montclair, Ca 91763 (909)448-3600 www.cityofmontclair.org

Citations will not be recommended for dismissal for a lost or forgotten permit, improperly displayed permit, not knowing the regulations, and/or not seeing the signs. An Administrative Review request must be submitted in writing. Please be specific in explaining why the citation should be dismissed. The Administrative Review Request must be mailed, along with a photocopy of the citation to:

Montclair Police Department Parking Enforcement Center, P.O. Box 6010, Inglewood, CA 90312-6010 For information, call: 1-866-353-7160.

NAME							
(Print)	Last	First	MI	Da	Daytime Telephone		
Address				21:			
Street Address				City	State	Zip	
	A	DMINISTR	ATIVE RE	VIEW REQUI	EST		
Must be fil Notice.	ed by the due	e date listed or	ı the citation	or by the due da	ate listed on the	Delinquent	
Type of Violation				Location of Violation			
Cita	ation No.			Vehicle License No.			
	STATE YO	OUR REASON	IS FOR AN	ADMINISTRAT	IVE REVIEW		
Date Submitted				Signature			
		FO	R OFFICE US	SE ONLY			
Rec'd ETE	c	Ву		Rec'd MPD	Ву		
Reviewed		Ву		Finding Mailed	Ву	'	
Rev. 11/15/2	23						