

**CITY OF SANTA CLARITA  
REQUEST FOR ADMINISTRATIVE REVIEW  
OF A PARKING CITATION**

I hereby request an Administrative Review of my parking citation. The reason I am contesting this parking citation is:

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(If more space is required, use the back of this form.)

“I understand that this Request for Administrative Review must be postmarked within 21 days after the issuance of my citation or within 10 days of the mailing of the notice of delinquent parking violation for the request to be processed.”

I certify that the foregoing is true and correct.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The City of Santa Clarita will conduct a review of your parking citation based on the information you provide. **You must include copies of all applicable documentation relating to your appeal** (i.e. vehicle registration, permit or placard). The documentation will not be returned to you. Your citation will either be canceled or upheld. Results of the review will be mailed to the vehicle’s registered address on file with the DMV. In order for your request to be processed, the following information must be provided:

**Please Print Clearly**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Citation #: \_\_\_\_\_ License Plate #: \_\_\_\_\_

**Mail To: City of Santa Clarita, P.O. Box 2730, Huntington Beach, CA 92647-2730**