

# CITY OF ORLAND PARKING PROGRAM

## 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 ORLAND POLICED DEPARTMENT 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

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

\_\_\_\_\_  
FULL NAME

\_\_\_\_\_  
CITY STATE ZIP CODE

THE ADMINISTRATIVE REVIEW OFFICER REVIEWED ALL INFORMATION AND YOU WERE FOUND TO BE:

\_\_\_ LIABLE

\_\_\_ NOT LIABLE