City of Grand Rapids
Parking Violations Bureau

CIVIL INFRACTION REQUEST

NAME _____ **DATE OF BIRTH** _____

ADDRESS _____

CITY, STATE & ZIP _____

DAYTIME PHONE _____ **FAX #** _____

EMAIL _____

DRIVER'S LICENSE NUMBER _____

REASON FOR REQUESTING COURT HEARING

_____

_____

_____

_____

VIOLATION INFORMATION

TICKET # _____ **DATE AND TIME ISSUED** _____

VIOLATION _____ **CODE** _____ **METER** _____

VIOLATION ADDRESS _____ **BADGE** _____

LICENSE PLATE # _____ **VEH. MAKE** _____

REGISTERED OWNER * _____ **SAME AS ABOVE ( )**

_____

SIGNATURE OF REGISTERED OWNER **DATE**

*****THIS REQUEST MUST BE COMPLETED BY THE REGISTERED OWNER OF THE VEHICLE*****

Please fill out this request and return to our office within 7 days of receipt. Your parking ticket will be converted to a "civil infraction" and transferred to the 61st District Court. The Court will mail your copy of the civil infraction to you along with a letter advising you of your appearance date. The Court has the authority to impose court costs on all judgments of responsibility for the civil infraction. The City of Grand Rapids Parking Violations Bureau will no longer handle this parking ticket.

If you cancel this request, there may be a $20.00 court cancellation fee imposed by the Parking Violations Bureau.

cmaier 02/14/2008