



CITY OF CULVER CITY
ADMINISTRATIVE HEARING HARDSHIP WAIVER REQUEST

As per CCMC Section 1.02.045, the following information is required as proof of the inability to deposit the full amount of the parking penalty prior to contesting the following citation:

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_

Citation Number \_\_\_\_\_ Date Issued: \_\_\_\_\_ Due Date: \_\_\_\_\_

If more than one citation is being contested; list additional citation numbers:

Citation # \_\_\_\_\_ Date \_\_\_\_\_ Citation # \_\_\_\_\_ Date \_\_\_\_\_

In order for your request to be considered you must submit your most current IRS tax filing, or copy of disability, welfare payment stubs, etc. to support the following:

1. EMPLOYMENT

- ( ) Employed
( ) Full-time
( ) Part-time
( ) Unemployed
( ) Disabled
( ) Student
( ) Other

2. SUPPORTED BY:

- ( ) Self
( ) Spouse
( ) Parents
( ) Welfare
( ) S.S.I
( ) A.D.C
( ) Other \_\_\_\_\_

3. PERSONS SUPPORTED

- ( ) Self
( ) Spouse
( ) Children (# of) \_\_\_\_\_
( ) Other
( ) TOTAL \_\_\_\_\_

4. If unemployed; enter the number of months of unemployment \_\_\_\_\_.

5. MONTHLY INCOME

Unemployment \$ \_\_\_\_\_
Salary \$ \_\_\_\_\_
Disability \$ \_\_\_\_\_
Other \$ \_\_\_\_\_
Other \$ \_\_\_\_\_
Other \$ \_\_\_\_\_
Other \$ \_\_\_\_\_

6. MONTHLY EXPENSES

Rent/Mortgage \$ \_\_\_\_\_
Utilities \$ \_\_\_\_\_
Loans \$ \_\_\_\_\_
Credit Cards \$ \_\_\_\_\_
Food/Clothing \$ \_\_\_\_\_
Transportation \$ \_\_\_\_\_
Medical/Dental \$ \_\_\_\_\_
\$ \_\_\_\_\_

TOTAL INCOME \$ \_\_\_\_\_

TOTAL EXPENSES \$ \_\_\_\_\_

7. CASH BALANCES

Savings Accounts \$ \_\_\_\_\_
Checking Accounts \$ \_\_\_\_\_
Cash on Hand \$ \_\_\_\_\_

8. LIST CREDIT CARDS

ACCT # \_\_\_\_\_
ACCT # \_\_\_\_\_
ACCT # \_\_\_\_\_

9. If found liable the total amount due must be paid within 20 days. If payment is late the matter may be referred for collection, which includes but is not limited to the filing of a small claims court action.

I declare, under the penalty of making a false declaration, that I am authorized to make this statement and to the best of my knowledge and belief it is a true, correct and complete statement made in good faith.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

FOR CITY USE ONLY: { } GRANTED { } DENIED

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

Signature: \_\_\_\_\_ DATE: \_\_\_\_\_