



**Parking Citation Administrative Hearing Request**

Attach citation to this page.

**Please Print Clearly!**

Name		
Address		
City	St	Zip
Daytime Phone Number		

Citation Issue Number	Date Issued
Date Appeal Filed	(Must be appealed within 21 days of issuance)
Violation	
Email Address	

Return Form, Citation and Supporting Documentation to:

Winnetka Police Department, 410 Green Bay Rd, Winnetka, IL 60093 or email to [police@winnetka.org](mailto:police@winnetka.org)

**CHOOSE ONE OF THE BELOW TWO OPTIONS. YOU MUST SIGN ONE OR THE OTHER.**

**Option 1: I Request a hearing in front of a Hearing Officer**

I will appear at the time and date specified and state my case to a Hearing Officer. The Hearing Officer will decide whether I am Liable or not. If found Liable I understand there will is a \$40 Hearing Fee added to the assessed fine for the violation.

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

**Municipal Tickets time 9:00am  
Parking Tickets time 10:30am**

Hearing Date: \_\_\_\_\_  
(Assigned by the Police Department in accordance with published schedules)

Location: Winnetka Village Hall, 510 Green Bay Road, Winnetka IL. (Council Chambers / 2<sup>nd</sup> Floor. (ADA accessible)

**Option 2: I wish to submit my hearing request in writing and waive a personal appearance.**

I will not be required to appear at the hearing and state my case to a hearing officer. The Hearing Officer will decide whether I am Liable or not based on this form and any supporting information I attach. If found Liable I understand there will is a \$40 Hearing Fee added to the assessed fine for the violation. I will be notified by US Mail of the outcome.

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

Indicate on reverse why the ticket was issued in error or why you are not liable for this violation:

Provide copy to respondent

