

Request for Administrative Review -Parking Violations

FINANCE OFFICE 411 Main Street P.O. Box 3420 Chico, CA 95927-3420 530.879.7320

CITATION #	LICENSE #			
Name:				
Address:				
City:	State:	Zip:		Date Stamp
Phone #:				
Agency issuing citation:	☐ City of Chico	☐ Butte College	Other	
Reason for Contesting Citation and Requesting an Administrative Review:				
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Applicant Signature:			Da	nte:
Received By:			☐ By Phone	☐ In Person