



Derby Police Department

125 Water Street
Derby, Connecticut 06418
Tel. (203) 735-7811
FAX (203) 736-1499



PETITION FOR PARKING VIOLATION HEARING

INSTRUCTIONS

1. Complete sections A, B, & C
2. Provide a detailed explanation of your reason for the request for hearing.
3. Sign the form.
4. Turn in or mail this form to the Derby Police Department: Parking Violation Hearing

SECTION A: COMPLAINANT INFORMATION

Name	Phone Number	Date Submitted
Address		City / Town
		Zip

SECTION B: PARKING TICKET INFORMATION

Registration		State	
Make of vehicle	Type	Color	
Ticket Number		Fine	
Date	Time	Location	

SECTION C: REASON FOR HEARING REQUEST

If additional space is needed, use the back of this form.

I hereby declare under penalties of law that the foregoing statements are true.

SIGNATURE

DATE

SECTION D: DECISION OF HEARING OFFICER (To be completed by hearing officer)

SIGNATURE

DATE