

REQUEST FOR HEARING FORM

ADMINISTRATIVE HEARING OFFICE

In the matter of:

REQUEST FOR HEARING
*HEAVY DUTY VEHICLE INSPECTION
PROGRAM*

(Name of Cited Vehicle Owner)

COMPLETE ONE REQUEST FOR HEARING FOR EACH CITATION CONTESTED

A CITED VEHICLE OWNER WANTING TO FILE A REQUEST FOR HEARING SHALL FILE THE REQUEST WITH THE EXECUTIVE OFFICER WITHIN 45 DAYS FROM DATE OF BEING SERVED WITH A HEAVY DUTY VEHICLE INSPECTION PROGRAM CITATION (TITLE 17, CALIFORNIA CODE OF REGULATIONS, SECTION 60075.17(c))

Answer all questions.

You must fill out Cited Party Information even if you are the Representative.

PART I: CITATION INFORMATION

This is an appeal for Citation number (Attach Copy):

Date Citation issued:	Date Cited Party received Citation:
Did the Cited Party receive the Citation by:	
Certified Mail? <input type="checkbox"/> Yes <input type="checkbox"/> No	Personal Delivery? <input type="checkbox"/> Yes <input type="checkbox"/> No

PART II: REPRESENTATION

Are you intending to be represented at the hearing? <input type="checkbox"/> Yes <input type="checkbox"/> No

PART III: CONTACT INFORMATION

INFORMATION OF PARTY REQUESTING HEARING

Type or Print Name:	Title, if applicable:
Owner/Company Name:	
Mailing Address:	City/State/Zip:
Telephone Number:	Fax Number:
Email Address:	

REQUEST FOR HEARING FORM

REPRESENTATIVE INFORMATION

Type or Print Name:	Title, if applicable:
Owner/Company Name	
Mailing Address:	City/State/Zip:
Telephone Number:	Fax Number:
Email Address:	

Answer all questions.
You must fill out Owner Information even if you are the Representative.

PART IV: HEARING REQUEST INFORMATION

A hearing is being requested for the following reasons (check one or more):

<input type="checkbox"/> Deny existence of the violation as specified in the Citation notice;
<input type="checkbox"/> Deny existence of prior violation;
<input type="checkbox"/> Other (Explain):

PART V: EXPLANATION FOR REQUEST FOR HEARING

The specific facts or contentions upon which the Request for Hearing are based: (State facts or contentions for each reason identified in 4 above)
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The response to question(s) number _____ is (are) continued on separate sheet(s) of paper, which is (are) attached and incorporated herein by reference.

Signature (Cited Party or Representative):	Date:
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MAIL COMPLETED FORM WITH A COPY OF THE CITATION TO:

**CALIFORNIA AIR RESOURCES BOARD
ATTN: LEGAL OFFICE
P.O. BOX 2815
SACRAMENTO, CA 95812
OR**

requestforhearing@arb.ca.gov

Any questions regarding this form should be directed to the Hearing Office at (916) 322-2884.