



City of Camas
 616 NE 4th Avenue
 PO Box 1055
 Camas, WA 98607
 Ph: (360) 834-2462
 Fax: (360) 834-1535

**PARKING TICKET HEARING REQUEST
 NO TICKET ATTACHED**

Date _____

Name _____

Ticket # _____

Mailing Address _____

License Plate _____

City/State/Zip _____

State of Plate Issue _____

E-Mail Address _____

Phone Number _____

INSTRUCTIONS

All requests must be made in writing and **MUST** be received by the City of Camas within fifteen (15) calendar days of the date shown above, pursuant to RCW 46.63.060(2)(h). You may submit your hearing request form either in person at the City of Camas Finance Department, 616 NE 4th Avenue, Camas, WA or by mail to the City of Camas, Finance Department, PO Box 1055, Camas, WA 98607.

IMPORTANT – Do not request a hearing, if you are not willing to attend a hearing before the Camas Municipal Court. Do not submit payment with this hearing request form.

You must check one of the boxes below.

I request a hearing to explain the circumstances. If you agree that you committed the infraction but would like to explain the circumstances, the court will notify you in writing of the hearing date. You may not require witnesses to appear at the hearing but they may attend voluntarily.

I promise to appear _____
 Your Signature

I request a hearing to contest this infraction notice. If you believe you did not commit the infraction, you may request a hearing. At the hearing, the state must prove by a preponderance (more likely than not) of the evidence that you committed the infraction. You may require witnesses, including the officer who issued the notice to appear at this hearing. The court will notify you in writing of the hearing date and how to request that witnesses be present.

I promise to appear _____
 Your Signature