



ADMINISTRATIVE CITATION NOTICE OF APPEAL

THIS SECTION TO BE COMPLETED BY APPELLANT

You may appeal the administrative citation by filing a written appeal notice together with the total amount of the penalty within 20 calendar days of the issuance of the citation. This notice must include the reason(s) for the appeal. Failure to pay the total amount of the penalty or complete the notice of appeal renders the appeal incomplete. The cited party will then be responsible for the total amount of the penalty and the appeal will be denied. You will be notified of your hearing date at least 10 calendar days before the hearing.

Citation number:

Date issued:

Responsible party's name:

Daytime phone:

Correspondence mailing address:

Email address:

Reason for the appeal (you may attach additional pages as needed):

Amount of administrative citation penalty: \$

I have filed an Advance Deposit Hardship Waiver.

Payment may be in the form of a cashier's check payable to the San Bernardino County. A credit card payment may also be made on-line at www.CitationProcessingCenter.com or by calling (800) 969-6158.

Any administrative citation penalty that has been deposited will be refunded if it is determined, after a hearing, that the person or entity charged with the violation was not responsible for the violation or that there was no violation as charged in the administrative citation. If you believe you are unable to pay the advance deposit penalty at the time of filing the notice of appeal, you may request an Advance Deposit Hardship Waiver Form via email at: EHS.CustomerService@dph.sbcounty.gov or via phone at (800) 442-2283.

I hereby request a hearing before a hearing officer and certify that the above statement is true and correct.

Responsible Party's Signature

Date

Submit your completed forms along with penalty to: San Bernardino County Environmental Health Services, C/O Citation Processing Center, PO Box 7275, Newport Beach CA 92658-7275