VEHICLE IMPOUND HEARING RIGHTS

ATTENTION: As a vehicle owner or other person entitled to possession of an impounded vehicle, you have the right to a hearing if you believe your vehicle should not have been impounded. You may request this hearing either before or after you pay the impound and storage charges to the Official Police Garage which has custody of you vehicle. The purpose of the hearing is to determine whether there was PROBABLE CAUSE to impound the vehicle, that is, was the impounding officer authorized to legally remove your vehicle?

The hearing will consist of a meeting with the Impound Hearing Officer of the station which impounded your vehicle. You may present any witnesses or other evidence you believe will show that your vehicle should not have been impounded. You must establish that you are the owner of the vehicle or that you have some other right to possession of it.

If the hearing officer determines that there was NO probable cause and you vehicle should not have been impounded, it will be released to you without charge, or you will be repaid after processing by mail for the charges you paid to the Official Police Garage. If the hearing officer determines that the vehicle was properly impounded, you must pay the impound and storage charges or the Official Police Garage acquires a lien against you vehicle.

NOTE: This hearing does not affect any related traffic citation or other criminal proceedings. If you wish to challenge the charges underlying any such citation or criminal proceeding, you must do so in the appropriate court.

To request a hearing, you must telephone, write or appear in person at the police station which impounded your vehicle within ten (10) days of the date appearing on the written notice. Failure to do so will end your right to a hearing. Refer to the DR Number when requesting a hearing

| Area/Division: Address: Telephone: | | a ^m x | . # 2 | | |
|--|---------------------|------------------|--|---|---|
| DR Number: | | | | | |
| Date of Notification: | | | | | * |
| I am requesting a hearing t | | | | | |
| Year | Make | Lice | ense | *************************************** | |
| The DR number of the imp | ounded vehicle is _ | | | | |
| | | Name: | Acceptable to the control of the con | | |
| | | | | | |
| | | Telephone: | | | |
| Date: | **** | | | | |
| Signature: | | | | | |