



## JACKSON, GA POLICE DEPARTMENT HEARING REQUEST FORM

Under Georgia Law, Official Code of Georgia Annotated 40-14-18, the registered owner has the right to contest a civil violation by attending an Administrative Hearing. The request for hearing must be submitted within 60 days of the issue date listed on the citation.

Please complete the section below and follow the instructions for returning this form. Once the request has been received and approved, you will be notified by first class mail of your hearing date, location and time.

**All fields are required. Failure to complete this form in its entirety will result in your request being denied.**

Person Requesting Hearing:		Citation #: (Top Right-Hand Corner of Violation)	
Street Number:	Street Name:	Apt/Unit/Lot #:	
City:		State:	Zip:
Phone#:	Email: (only used in case of emergency notification)		

**Email, Mail or Fax This Form To:**

Jackson, GA Police Department  
C/O Court Hearing Department  
4411 Oakwood Drive  
Chattanooga, TN 37416  
Fax: (423) 702-4404  
Email: [hearings@violationpayment.net](mailto:hearings@violationpayment.net)

For any questions, Contact us:

By Phone: 1-855-252-0086

By Email: [hearings@violationpayment.net](mailto:hearings@violationpayment.net)

---

*For Departmental Use Only (Do Not Write Below the Line Above)*

Date Received: \_\_\_\_\_

Received by: \_\_\_\_\_

Hearing Date Scheduled: \_\_\_\_\_

Date Notice Sent to Above Named Party: \_\_\_\_\_