

FAIRBURN 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 a hearing <u>must</u> 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.

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Registered Owner:				Citation #:	
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Street Number:	Street Name:			Apt/Unit/Lot #:	
City:			State:	Zip:	
-					
Required Date of Birth: Required		Required Phon	ired Phone #:		
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Required Email:					

Email, Mail or Fax This Form To:

Fairburn Police Department C/O Court Hearing Department 4411 Oakwood Drive Chattanooga, TN 37416

Fax: (423) 702-4404

Email: hearings@violationpayment.net

For any questions, Contact us: By Phone: 1-855-252-0086

By Email: 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: