



CITY OF BERKELEY METER CHECK FORM

City of Berkeley, Citation Processing Center, P.O. Box 54017, Los Angeles, CA. 90054-0017 Tel: 866.226.9288 TDD: 510.981.7250

Date: _____

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Date of Citation:	Citation Number:
License Plate Number:	Meter Number (see citation):

Please check one: <input type="checkbox"/> TIMING OFF <input type="checkbox"/> METER JAMMED/UNABLE TO ACCEPT COINS <input type="checkbox"/> COIN DID NOT REGISTER <input type="checkbox"/> METER FLASHING "FAILED"	<input type="checkbox"/> MAXIMUM METER TIME NOT POSTED <input type="checkbox"/> METER HEAD CLOUDY/TIME NOT VISIBLE <input type="checkbox"/> PROBLEM WITH DMT MACHINE/DMT RECEIPT (DESCRIBE BELOW) <input type="checkbox"/> OTHER (DESCRIBE BELOW)
---	--

IF YOU CHECKED THE BOX MARKED "OTHER", PLEASE EXPLAIN:

If your citation was not dismissed administratively, you have the option to either pay the parking fine or to request a hearing within 21 days of the date of the decision. If you elect to have a hearing, the full amount of the fine must accompany your request.

IMPORTANT NOTE: If you do not receive a written decision to this matter within 21 days, **it is YOUR responsibility** to contact this office for the results. Failure to contact this office within this time frame may result in a increase of the fees and the possible waiver of future rights to have a hearing.

For Office Use Only:

Good Meter, Payment Due Faulty Meter Check Included Check Returned

Reviewer: _____ Date: _____