



**Animal Services Unit
 Administrative Fines & Fees Review Form**

INSTRUCTIONS

1. Complete section A only.
2. Attach a copy of your current Pet License.
3. Appeal must be received within 15 days of the citation date (CHMC 8-183 6).
4. Return this form to the **Citrus Heights Police Department, Animal Services Unit**.
5. Written/email notification of the disposition of your request will be mailed/emailed generally within 30 days from receipt of your Review Form.

SECTION A: REQUESTOR INFORMATION		Please print or type information	
DATE OF INCIDENT	INCIDENT NUMBER	CHAS CITATION NUMBER	
ANIMAL OWNER/RESPONSIBLE PARTY NAME		PHONE #	
ANIMAL OWNER/RESPONSIBLE PARTY ADDRESS # STREET		CITY/TOWN	ZIP CODE
ANIMAL OWNER/RESIDENT EMAIL ADDRESS		BALANCE DUE (IF AVAILABLE) \$	

BRIEF EXPLANATION OF REASON(S) FOR REQUEST: *APPEAL* *BALANCE INQUIRY* *OTHER*

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SIGNATURE	DATE
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SECTION B: ADMINISTRATIVE USE	<input type="checkbox"/> <i>BILLABLE</i> <input type="checkbox"/> <i>NOT BILLABLE</i>
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RECEIVED DATE: _____ REVIEWED BY: _____ ID # _____

REQUESTING FEES WAIVED YES NO AMOUNT REQUESTED WAIVED: _____

SUPPORTING DOCUMENTATION:

RECOMMENDATION: *APPROVED* *DENIED (REASON)* _____

SENIOR ANIMAL SERVICES OFFICER: _____ Date: _____

SUPPORT SERVICES SUPERVISOR: _____ Date: _____

COMMANDER: _____ Date: _____

MANAGEMENT ANALYST: _____ Date: _____