



Deerfield Beach
Florida

City of Deerfield Beach Parking Enforcement Division

Request for Administrative Review

Parking Citation #: **DB** _____ Date of Citation: _____

Vehicle Tag#: _____ State: _____ Yr./Make _____

Requesters Name: _____ Phone #: _____

Requesters Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Name of Vehicle Owner: _____ Phone #: _____

Address of Vehicle Owner: _____

City: _____ State: _____ Zip: _____

Reason for Administrative Review: (Attach additional pages if needed.)

The review will take up to ten business days to process. Once rendered, a decision letter will be mailed.

I hereby submit this request to have the above-referenced parking citation administratively reviewed by the City's Parking Enforcement Division. I acknowledge that administrative review shall be a condition precedent to filing an appeal with the Special Magistrate. The decision of the City's Parking Division is appealable to the Special Magistrate, subject to applicable administrative costs.

Sign: _____ Date: _____

Please include a copy of the citation along with any backup documentation to:

City of Deerfield Beach-Parking Enforcement Office
150 NE 2nd Avenue
Deerfield Beach, FL 33441
(954) 480-4499
web.parking@deerfield-beach.com