



PURPOSE OF HEARING:

The purpose of a Post Storage Hearing is solely for determining the validity of the impoundment. A hearing is also to determine if a vehicle that is impounded for thirty-days is eligible for early release, pursuant to 14602.6 of the California Vehicle Code. As a vehicle owner, you have the right to a Post Storage Hearing pursuant to 22852 of California Vehicle Code.

HOW TO REQUEST A HEARING:

The request for a hearing must be within ten (10) days of the date of mailing of the "Notice of Stored Vehicle". Failure to request a hearing within ten (10) days of the notice, or failure to attend a scheduled hearing will end your right to a hearing. Information regarding this process is available 24 hours a day by calling 909-620-2081.

- 1.) For a hearing in writing, you must complete the bottom of this form and return it to:
 Pomona Police Department – Traffic Services Unit
 100 W. Commercial St.
 Pomona, CA. 91768
 Post Storage Hearing Hours: 8:00 A.M. – 10:00 A.M., Monday through Friday (closed on holidays).
- 2.) Hearings by telephone or in person are by appointment only. To request an appointment call 909-620-2081.

RESULTS OF HEARING:

Pursuant to Section 22852 V.C., A hearing will be conducted within forty-eight (48) hours (excluding weekends and holidays) after your request has been received by the Pomona Police Traffic Services Unit. The Supervisor that reviews the matter will provide a written reply to you. You may also call 909-620-2081 for the results of your hearing.

TO BE COMPLETED BY THE REGISTERED OR LEGAL OWNER:

TODAY'S DATE:	TIME:	DATE OF IMPOUND:	POLICE FILE NUMBER:
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VEHICLE INFORMATION

YEAR:	MAKE:	MODEL:	LICENSE PLATE NUMBER:	STATE:
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PERSON REQUESTING HEARING:	
FULL NAME:	
ADDRESS:	
CITY/STATE/ZIP:	
PHONE:	EMAIL ADDRESS:

YOUR INTEREST IN VEHICLE:
<input type="checkbox"/> THE REGISTERED OWNER
<input type="checkbox"/> THE LEGAL OWNER
<input type="checkbox"/> OTHER (EXPLAIN):

STATEMENT OF ALL OF THE FACTS THAT YOU WOULD LIKE CONSIDERED (Attach an additional page if necessary):

Signature: _____

DO NOT WRITE IN THIS AREA - FOR OFFICE USE ONLY:	
Date/Time Received:	Received By:
Comments:	