

FOSTORIA MUNICIPAL COURT

Parking Ticket No. _____

ANSWER OF OWNER/OPERATOR

I, _____, deny the allegations set forth in the above described parking ticket and request a hearing at the Court's earliest convenience.

Owner/Operator

Address

Phone Number

WAIVER OF HEARING

I, _____, hereby waive my right to a hearing and ask the Court to base its decision on the reasons set forth below as to why my parking ticket should be dismissed with the cost to be paid by the City of Fostoria:

Owner/Operator

Address

Phone Number