



Request for Screening Officer Review

Tel: 519-255-6298 Fax: 519-255-9467
1266 McDougall Street, Windsor, ON N8X 3M7

****FILL OUT IN ITS ENTIRETY****

| | | | |
|---|--------------------------|--|---|
| Penalty Notice Recipient | | | |
| Name: (first and last) | | | |
| Address: | | | |
| City: | Province: | Postal Code: | Telephone: |
| Please indicate a reply preference: | | | |
| Canada Post | <input type="checkbox"/> | Email | <input type="checkbox"/> Email Address: |
| Penalty Notice Information (Infraction) (Please provide the information found on the Penalty Notice) | | | |
| Penalty Notice No: | Penalty Date: | Plate Number: | |
| Please choose your request below: | | | |
| <input type="checkbox"/> Penalty Review. Review of Administrative Penalty for reasons stated below. | | <input type="checkbox"/> Extension of Due Date. Documentation must be provided for extension of Payment Due Date to be granted. | |
| Instructions for filling out Screening Review Form: | | | |
| <ul style="list-style-type: none"> • Please check your preferred Screening reply option at the top of the page. • Please make sure form is filled out in its entirety, and that hand writing is clear and legible. Mistakes due to the illegible submissions are not the fault of the Parking Enforcement Department • Screenings usually take between 1 and 2 weeks for a decision and reply to be sent. • The City of Windsor cannot be responsible for the actions of Canada Post, nor the time lines of their delivery. • Please read reply correspondence thoroughly as payment, and or, next step for resolution will be spelled out for your assistance. • Details for submitting request are at the bottom of the next page. | | | |

Failure to complete this form by the **DUE DATE** listed on any correspondence issued from the City of Windsor's Parking Enforcement Office will forfeit your right for any further dispute in accordance with Bylaw 9023 (Part VII Section 98). As a result, the ticket will remain affirmed to the price listed on the 'Notice of Administrative Penalty Late Payment Notice' and sent to the Ministry of Transportation for Plate Denial.

Reason for Screening Request - You are required to provide specific reason(s).

- Please provide a factual and detailed explanation of your reason(s) for disputing this Offence.
- If you wish to support your Screening with images or other documentation please attach them with this request.
- The Screening Decision reply will be sent to you by the method you indicated on page 1.
- If more room is required-Please attach separate sheet.

Attachment(s) Included: YES No (please check one)

Statement of Penalty Notice Recipient

I represent and I agree that:

- I am the registered owner of the vehicle (for Parking Penalty Notices only); or representing Agent
- **The City of Windsor is not responsible for illegible or incomplete forms, nor will it be responsible for the untimely deliverance of forms through Canada Post.**
- Failure to complete this form in its entirety may result in the Administrative Penalty and additional fees being affirmed.
- I have read and understand the conditions of this application.

Signature

Date

Instructions for Submitting Screening Request Form

Please submit your completed form to the City of Windsor by:

- In person or by **Canada Post** to City of Windsor, Public Works Parking Enforcement, 1266 McDougall Street, Windsor, Ontario, N8X 3M7.
- Or by fax to: 519-255-9467

| | |
|-----------------------|--|
| Applicant's Name | |
| Penalty Notice Number | |

| | | |
|----------------------------|--|------------------------------|
| 1 <input type="checkbox"/> | The administrative penalty is cancelled and no further action is required. | |
| 2 <input type="checkbox"/> | The administrative penalty is reduced to \$_____ is payable on or before: _____. Please see <i>Note</i> below. | |
| 3 <input type="checkbox"/> | The administrative penalty is affirmed . The amount of \$_____ is payable on or before: _____. Please see <i>Note</i> below. | |
| 4 <input type="checkbox"/> | The request for extension is refused. Please see <i>Note</i> below. | |
| 5 <input type="checkbox"/> | The request for extension is allowed and the new date is: _____. Please see <i>Note</i> below. | |
| 6 <input type="checkbox"/> | Other Decision: | |
| 7 <input type="checkbox"/> | <u>Screening Officer Comments:</u> | |
| Screening Date: | | Screening Officer Signature: |

Note: An additional \$25 late payment fee and a \$10 MTO Search fee (totaling \$35 in additional fees) will be added if payment is not made within the due date time frame.