



Greg Wagner
Controller

Todd Rydstrom
Deputy Controller

REQUEST FOR HARDSHIP WAIVER FOR ADVANCE DEPOSIT OF CITATION FINE

If the recipient of an administrative citation issued by the City & County of San Francisco is financially unable to make an advance deposit of the fine amount prior to the Controller's administrative review, the recipient may request an advance deposit hardship waiver. The request for a waiver must be filed within 30 calendar days of the citation date. Please complete, sign and return this application form and supporting documents to the address or fax number below or email to controller.administrativeappeals@sfgov.org.

Citation recipient's name: _____ Citation date: _____

Citation recipient's contact information:

Address: _____

Phone number: _____

Email: _____

1. Describe the circumstances demonstrating that advance deposit of fines would impose an undue hardship:

2. Attach a copy of the citation and any documents or information you would like the Controller to consider in support of this application.

- Copy of citation attached
- Supporting documentation attached:
 - Federal income tax return (Form 1040, 1040A)
 - Verification of Social Security benefits
 - Verification of Supplemental Security Income
 - Welfare or General Assistance eligibility Notice of Action/income verification
 - Documentation of unemployment from Employment Development Department
 - Other (please specify): _____

3. Sign and date your application.

I declare under penalty of perjury that the reasons and supporting documents provided above are true and accurate to the best of my knowledge.

Signature: _____

Name (print): _____ Date: _____

The Controller will determine within 10 days of receiving your application whether to grant or deny a waiver and provide the reason for the determination. We will provide a written determination to you and the charging official. The Controller's written determination shall be a final administrative determination.