COUNTY OF RIVERSIDE
CODE ENFORCEMENT DEPARTMENT

REQUEST FOR ADVANCE DEPOSIT HARDSHIP WAIVER

**** This waiver must be filed with the**
Request for Appeal of Administrative Civil Penalty **

Please provide a statement and supporting documents setting forth your financial inability to deposit the full amount of the administrative civil penalty in advance of the hearing:

Case Number: _____

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I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Dated: _____

_____
Signature

_____
Printed name of requesting party

4080 Lemon Street, 12th Floor, Riverside CA 92501
(951) 955-2004 • Fax (951) 955-8680