

SUPERIOR COURT OF THE STATE OF CALIFORNIA, COUNTY OF NEVADA

201 Church Street, Suite 7, Nevada City, CA 95959 (530) 265-1311

10075 Levon Avenue, Suite 107, Truckee, CA 96161 (530) 582-7835

PEOPLE OF THE STATE OF CALIFORNIA,

vs

APPLICATION FOR REVIEW OF CIVIL ASSESSMENT [Penal Code § 1214.1] AND/OR DELINQUENT FINE PAYMENTS

Defendant: _____

Case Number _____

1. REQUEST TO VACATE CIVIL ASSESSMENT/FAILURE TO PAY FINE

IMPORTANT: Written proof of any of the following that supports your explanation for failing to pay the fine ordered must be attached or your application will be returned.

HOSPITALIZED

RESIDENTIAL TREATMENT

NOT PERSON CITED

INCARCERATED

DEATH CERTIFICATE

CLERICAL ERROR

MILITARY DUTY

OTHER EVIDENCE OF EXTRAORDINARY CIRCUMSTANCES

The following is an explanation of my failure(s) to pay the fine ordered: (Please print and include mandatory supporting attachments.)

2. REQUEST FOR REVIEW OF DELINQUENT FINE PAYMENTS

I am requesting the following relief:

New payment amount (\$ _____ /mo.) New payment start date (_____)

Pay fine with community service @ \$10/hr. **NOTE:** Civil Assessment cannot be satisfied with community service.

Pay in full without Civil Assessment on _____

Convert fine to jail time (misdemeanors and felonies only). **NOTE:** Civil Assessment cannot be converted to jail time.

Release hold on license Other: _____

Please state why you are making this request and list the facts in support of your request below:

Attached number of pages: _____

I declare under penalty of perjury under the laws of the State of California that all of the foregoing information, and all attachments, are true and correct to the best of my knowledge.

Executed at _____ on _____
City and State Date

Address _____

Telephone # _____ Signature: _____

Note: It is mandatory to list all contact information requested.

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**ORDER ON APPLICATION FOR
REVIEW OF CIVIL ASSESSMENT
[Penal Code § 1214.1] AND/OR
DELINQUENT FINE PAYMENTS**

Defendant: _____

Case Number _____

THE COURT having read and considered the Application regarding review of Civil Assessment pursuant to Penal Code § 1214.1 and/or Review of Delinquent Fine Payment(s), hereby makes the following order:

Defendant's Application for Review of Civil Assessment is GRANTED; Civil Assessment is vacated and DMV DL hold is released provided that the fine of \$_____ is paid in full on or before _____

Defendant's Application for Review of Civil Assessment is DENIED.

Defendant's Application for Review of Delinquent Fine Payment(s) is DENIED; Delinquent fine(s) to remain with GC Services.

Defendant's Application for Review of Delinquent Fine Payment(s) is GRANTED as follows:

Other orders:

Date _____

Signature _____

- Judicial Officer
- Commissioner

For questions regarding fine balance, please contact the appropriate court location listed above.

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