

**Applicants are responsible for the completion and content of this form**

Penalty Notice Recipient		
Name (first and last)		Home Telephone
Address		Other Telephone
City		Fax Number
Province	Postal Code	Email Address

Penalty Notice Information (Infraction) (Please provide the information found on the Penalty Notice)		
Penalty Notice No.	Penalty Date	Plate Number <b>or</b> Name on Penalty Notice
Location where the Infraction Occurred (complete for <b>non-parking</b> Penalty Notices only)		
Offence		Section Number

Type of Screening Requested (You are required to check <b>one</b> preferred method of Screening)	
<input type="checkbox"/> <b>In-Person Screening</b> (Screening at City Hall)	<input type="checkbox"/> <b>Written Screening</b>
<b>Please Note:</b> A Written Screening allows your Screening to be processed without your attendance at City Hall.	

Complete this section only if you have selected to attend an In-Person Screening.			
<ul style="list-style-type: none"> <li>▪ Please check your preferred Screening appointment time below.</li> <li>▪ Screenings will be scheduled for the next available Tuesday</li> <li>▪ If you are not available to attend an In-Person Screening on a specific Tuesday, please include this information on your Screening Request form with the reason for your inability to attend. The scheduling of Screenings will only be delayed by a maximum of two weeks.</li> <li>▪ Your preference for a date and time will be considered but cannot be guaranteed. A Notice will be sent to you confirming the date and time of your Screening appointment.</li> <li>▪ If submitting your request by mail, email scanned copy or fax, a notice will be sent to you confirming the date and time of your Screening appointment.</li> <li>▪ In-Person Screening appointments can not be rescheduled or adjourned.</li> </ul>			
Screening Appointment Times			
<input type="checkbox"/> 9:00AM – 10:00AM	<input type="checkbox"/> 10:30AM – 12:00PM	<input type="checkbox"/> 1:00PM – 2:00PM	<input type="checkbox"/> 2:30PM – 4:00PM

**Reason for Screening** (you are required to provide specific reason(s))

- Please provide a factual and detailed explanation of your reason(s) for your Screening request.
- If you wish to support your Screening with images or other documentation please bring them with you at your scheduled In-Person Screening (if applicable) **or** attach them to this request.
- The Screening Decision will be sent to you.

Continued on next page.

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**Attachment(s) included** (please check the relevant box): ☐ Yes ☐ No

**Statement of Penalty Notice Recipient**

I represent and warrant that:

- I am the registered owner of the vehicle (for Parking Penalty Notices only); or
- I am the person named on the Penalty Notice (for Non-Parking Penalty Notices only);
- I acknowledge that if I fail to appear and to remain at my scheduled In-Person Screening until my matter has been determined by the Screening Officer, I will be deemed to have abandoned my request for a Screening, the Administrative Penalty will be affirmed, and I will be liable for an additional fee for having failed to appear (currently \$50.00), and
- I have read and understand the conditions of this application.

Signature

Date

**Instructions for Submitting In-Person Screening and Written Screening Request Form**

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

**a) Regular letter mail to:** City of Oshawa, City Hall, 50 Centre St S, Oshawa, ON L1H 3Z7

**b) Emailed scanned copy to:** [AMPappeals@oshawa.ca](mailto:AMPappeals@oshawa.ca)

**c) Facsimile (Fax) to:** 905-436-5642

**d) In person to Service Oshawa at:** 1<sup>st</sup> Floor West Wing, City Hall, 50 Centre St S, Oshawa, ON L1H 3Z7

For Internal Use Only		
<b>Application Received</b>	<b>Appointment Information</b>	
Date Stamp:	Appointment Date	Appointment Time
	Registered Owner Notified by: <input type="checkbox"/> Email <input type="checkbox"/> Mail <input type="checkbox"/> Fax <input type="checkbox"/> In Person	Date Notified.
	<b>Screening Location:</b> City Hall, 50 Centre St S, Oshawa, Ontario. Conference Room, West Wing (Behind the Committee Room).	Penalty Notice Recipient's Initials
<b>Screening Decision</b>		
Screening Officer's Signature		Date

Personal information contained on this form is collected and will be used for the purpose of administering the City's Administrative Penalty process. Questions about this collection should be directed to the City of Oshawa's Freedom of Information Co-ordinator at 905-436-3311.