



DEPARTMENT OF FINANCE

Citation Processing Center

P.O. Box 1423

Alexandria, Virginia 22313

Phone 866.353.0454

Fax 866.219.4908

Dear Sir or Madame,

You have requested a court date to contest a parking citation which will require completion of the District Court Affidavit.

Please observe the following rules when completing the affidavit. **Improperly completed affidavits will be returned unprocessed:**

- Once you schedule a court hearing, you forfeit your ability to prepay the ticket and your request cannot be removed or adjusted by the Finance Department.
- Affidavits must be completed by the registered vehicle owner.
- The completed affidavit must be returned within ten (10) business days.
- If you cannot appear on your assigned court date, contact the General District Court at 703.746.4041. The Court will decide what course of action you must take.
- If the citation is upheld, you will be assessed the original fine and any court costs.

Please mail the completed, signed and notarized affidavit with a copy of your driver's license to City of Alexandria, PO Box 1423, Alexandria, VA 22313-1423

Upon receipt of the completed affidavit, the hearing scheduling staff will process your request. Court dates are assigned based on officer availability. On the date of your hearing you will be required to appear at the Alexandria General District Court, at 520 King Street, Room 201, Alexandria, Virginia 22314.

A verification of the court date will be mailed to the registered owner of the vehicle at the address listed on the affidavit. If you have questions regarding the affidavit, please call 866.353.0454.

Sincerely,
Citation Processing Center

Enclosure



To the Director of Finance for the City of Alexandria, Virginia:

I, _____, do hereby certify that I am the registered owner of a _____,
(Name) (Vehicle Year/Make/Model)
bearing license plate _____, for which parking citation number _____ for violation code _____ was
(State/License Plate Number)
issued on _____.
(Date)

- I hereby waive formal service of process, request that this matter be set for trial in the Alexandria General District Court (520 King Street, Room 201), and agree to be present for trial as scheduled.
- I understand that if I cannot be present I must call the court at 703.746.4041 to reschedule. I also understand that payment of the fine will NOT excuse me from appearing in court.

Name Mailing Address (Street, City, State, Zip)

Phone Number Email Address Driver's License State/ Number

Signature Date

For Notary Use Only

State/Commonwealth of _____
[] City [] County of _____
Subscribed and sworn to/affirmed before me this _____ day of _____, 20____, by

(Print Name of Affiant)
My Commission expires: _____ Commission # _____

(Notary Public) (Date)

For City Use Only

The above named person appeared before a Notary and made oath to the truth of the above statements. As an authorized agent of the Director of Finance for the City of Alexandria, I hereby request, on behalf of the City of Alexandria, that you schedule a hearing for the vehicle owner listed above on the ____ day of _____, 20__ at 9:30 a.m. and subpoena _____ as a witness in this case.

(Signature) (Date)

For Court Use Only

Attorneys Present: _____

The Accused was this day:
 Tried in absence
 Present
Plea of accused:
 Not Guilty
 Nolo Contendere
 Guilty

And was tried and found by me:
 Not guilty
 Guilty as charged
 Guilty of _____
 Finding sufficient/deferred

I order:
 The charge dismissed
 A nolle prosequi on prosecution's motion

(Defendant's Attorney's Name)

No attorney Attorney waived

I impose the following disposition:
 Fine of \$_____ with \$_____ suspended

Judge Date