

THE CITY OF EVANSTON, ILLINOIS
DIVISION OF ADMINISTRATIVE HEARINGS
2100 Ridge Avenue, Rm. 2800, Evanston, IL 60201
Phone: 847-448-8163 Fax-847-448-8164

REQUEST FOR TOW HEARING

This form may be faxed, hand delivered, or mailed to the Hearings Division as provided above

Are you the registered owner of the vehicle? Yes \_\_\_ No \_\_\_
If no, who is the registered owner of vehicle? \_\_\_\_\_

Your Name \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Is the vehicle still in storage with the tow company? Yes \_\_\_ No \_\_\_
If no, the date storage fees were paid and the vehicle was removed from storage \_\_\_\_\_
If no, are you demanding Tow Hearing within 7 days? Yes \_\_\_ No \_\_\_
If yes, are you demanding Tow Hearing within 24 hours? Yes \_\_\_ No \_\_\_

Is the tow subsequent to a vehicle immobilization (boot)? Yes \_\_\_ No \_\_\_
If yes, are you also requesting a hearing on the immobilization (boot)? Yes \_\_\_ No \_\_\_

Make, Model and Year of Vehicle \_\_\_\_\_

License Plate Number \_\_\_\_\_ State of Registration \_\_\_\_\_

Date and Time of Tow \_\_\_\_\_, 20\_\_\_\_\_, at \_\_\_\_\_:\_\_\_\_\_.m.

Location Vehicle was Towed From \_\_\_\_\_

State the reason(s) you believe this tow is invalid or for any reason unjustified:
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

LATE HEARING REQUESTS: If this Request for Tow Hearing is late and is filed more than seven (7) days after the Notice of Tow was given, state the reason for being late.

\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

OWNER AUTHORIZATION: If you are the registered or legal owner and want someone else to represent you at the tow hearing, you must print names here and sign below: I, \_\_\_\_\_, certify that I am the registered or legal owner of the above vehicle and authorize the following person to represent me at my tow hearing with the City of Evanston: \_\_\_\_\_. I understand that it is the registered or legal owner's responsibility to notify this representative of the date, time and location of the scheduled tow hearing.

Signature \_\_\_\_\_ Date \_\_\_\_\_

NOTICE OF HEARING: This matter is scheduled for a tow hearing on \_\_\_\_\_, 20\_\_\_\_\_, at \_\_\_\_\_ am / pm, room 2800 at 2100 Ridge Avenue, Evanston, IL, without further notice.

PROOF OF SERVICE: I certify that a copy of this Notice of Tow Hearing date and time was served upon the above named owner by \_\_\_\_\_ (hand delivery/fax/U.S. mail/email) on \_\_\_\_\_, 20\_\_\_\_\_.

Signature \_\_\_\_\_