

**CITY OF PRIEST RIVER**  
P.O. Box 415  
552 High Street Priest River, ID 83856  
(208) 448-2123  
Fax (208) 448-2232



**APPEAL OF CITATION FOR CITY CODE VIOLATIONS**

If you have been issued a citation for violation of the Priest River City Code, you have 14 days to file your appeal with the City Clerk. The 14 days begins to count from (1) the date you were served with your citation; (2) the date the citation was served at your residence; or (3) the date the citation was placed in the mail. Failure to timely file your Appeal will result in your Appeal being denied. Only the person listed on the citation may file an Appeal.

This procedure is specific to circumstances when you believe the citation was issued in error. Specifically, you believe you are innocent of the allegation. This is not the appropriate place to contest or disagree with the law itself. If you believe that changes should be made to the City Code, the City encourages you to submit your comments and suggested changes to the Administrative Committee for review.

If you wish to contest your citation, please fill out the bottom of this page and return it to City Hall.

**PROCEDURE FOR APPEAL**

Once the City Clerk has received a timely and complete Notice of Appeal, your matter will be scheduled for a hearing in front of the Appeals Board. You will receive notice of the Hearing via first class mail. It is your responsibility to verify that the City has your correct mailing address.

At the Hearing, you will have the opportunity to present your own testimony or evidence showing why you believe you are not guilty of the act charged. Due to Board availability you will be allotted a maximum of thirty minutes to present your Appeal.

At the conclusion of the Hearing, the Appeals Board will deliberate and issue a ruling on your matter. If the Board finds that your citation was issued in error the citation will be dismissed with no further action required. If the Board finds that the citation is valid, you will have 14 calendar days to pay the citation in full. You will be notified of the Board's decision. The decision is final.

Appellant: \_\_\_\_\_

Date: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Citation Number: \_\_\_\_\_

Violation Alleged: \_\_\_\_\_

Reason for Appeal: \_\_\_\_\_

\_\_\_\_\_

<b>** FOR OFFICE USE ONLY **</b>	
Date Submitted: _____	Scheduled Hearing Date: _____
Appeals Board Decision: _____	Date Appellant Notified: _____