



**City of Santa Fe  
Vehicle Forfeiture Program  
Request for Hearing Form**

DATE: \_\_\_\_\_, 201\_\_

SFPD Case # \_\_\_\_\_

Seized Vehicle:

YEAR	MAKE	MODEL	COLOR	VEHICLE TAG#	VIN#
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**Vehicle Owner:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Mailing Address (if different)** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Telephone:** \_\_\_\_\_

- I **DO** or **DO NOT** have a lienholder (circle one), the lienholder is: \_\_\_\_\_; all lienholders that have interest and/or rights to the vehicle will be notified about the above vehicle and may repossess such at any time.
- I'm authorizing to go past the allotted (15) fifteen business days either due to a late hearing request with the Santa Fe Police Department or for other reasons.  
**Authorized** \_\_\_\_\_ **Not Authorized** \_\_\_\_\_
- If I get legal representation, my attorney will notify the City in writing, at least (2) two business days prior to the hearing of their Entry of Appearance. The attorney or City may continue the hearing to a later date past the allotted (15) business days. [Initials] \_\_\_\_\_

I am the registered owner of the above vehicle and request a hearing to contest the validity of the forfeiture of my vehicle under the City of Santa Fe Vehicle Forfeiture Ordinance 24-9. I understand this request must be within fifteen (15) business days of the Notice of Seizure otherwise this request will be denied and the vehicles will be processed as defined within the ordinance. Additional questions or information please refer online at [http://www.santafenm.gov/police\\_dwi\\_forfeiture](http://www.santafenm.gov/police_dwi_forfeiture).

Signed,

\_\_\_\_\_  
Vehicle Owner

\_\_\_\_\_  
Date

This form must be mailed or hand delivered to:

City of Santa Fe Police Department  
c/o Amanda Grundler, DWI Vehicle Forfeiture Program Coordinator  
2515 Camino Entrada  
Santa Fe, NM 87507  
arkatz@santafenm.gov  
Telephone: (505) 955-5042  
Facsimile: (505) 955-5021