



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

		SFPD Case #		
Seized Vehicle:				
YEAR MAKE	MODEL	COLOR	VEHICLE TAG#	VIN#
Vehicle Owner:				
Address:				
Telephone:				
I am am no	ot (chec	ck one) on act	ive duty in the Armed Fo	orces of the United States.
I <b>DO</b> or <b>DO NOT</b> have a	lienholder (circ	le one), the lie	enholder is:	
Fe Police Department or Authorized  If I get legal representation	Not Authorize	d	City in writing at least	(2) two business days prior to
	Appearance. Th			earing to a later date past the a
hearing of their Entry of A (15) business days.  I am the registered of my vehicle under the within fifteen (15) business	Appearance. The ded owner of the a City of Santa F cass days of the N d within the or	above vehicle e Vehicle Footice of Seizu dinance. Ac	and request a hearing to refeiture Ordinance 24-9. re otherwise this request	
hearing of their Entry of (15) business days.  I am the registere of my vehicle under the within fifteen (15) busines be processed as defined	Appearance. The ded owner of the a City of Santa F cass days of the N d within the or	above vehicle e Vehicle Footice of Seizu dinance. Ac	and request a hearing to refeiture Ordinance 24-9. re otherwise this request	contest the validity of the for I understand this request m will be denied and the vehicl
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City of Santa Fe Police Department c/o Amanda Katz, DWI Program Administrator 2515 Camino Entrada Santa Fe, NM 87507

Telephone: (505) 955-5042 Facsimile: (505) 955-5021