

City of Rochester Hills
COURT DATE REQUEST FORM
For Parking Tickets or Civil Infraction Notices

DATE: _____

TO: Building Department []

Fire Department []

OCSD, Rochester Hills Sub Station []

RE: Ticket Number _____

Name of Person Receiving Ticket

Address of Person Receiving Ticket

Phone Number

Has indicated a desire to plead not responsible to the referenced ticket and would like to appear before the judge. Please issue the necessary citation.

Drivers License Copy

CITY OF ROCHESTER HILLS TRAFFIC BUREAU

SIGNED _____