

# PETITION TO CONTEST A PARKING TICKET SUSPENSION UNDER SECTION 6-306.5 OF THE IVC



Office of the  
Secretary of State  
DEPARTMENT OF  
ADMINISTRATIVE HEARINGS

17 N. State, Ste. 1200 Rm. 212, Howlett Bldg.  
Chicago, IL 60602 Springfield, IL 62756  
www.cyberdriveillinois.com

Petitioner's Name	Petitioner's Driver's License No.
Street Address	Home Telephone Number
City/State/ZIP	Work Telephone Number

I hereby petition the Secretary of State for a hearing to remove the suspension from my driving record for the following reasons (check appropriate box(es) and circle the appropriate information within each paragraph that was missing).

The Certified Report of the appropriate municipal official notifying the Secretary of State of unpaid fees of penalties pursuant to Section 6-306.5 of the Illinois Vehicle Code (IVC) did not contain the following information:

- My name, last known address, driver's license number or registration number of the vehicle(s) registered to me in Illinois.
- The name of the municipality making the Certified Report to the Secretary of State.
- A statement that the municipality sent a notice of the driver's license suspension, as required by the municipality's ordinance, to me at the address recorded with the Secretary of the State; the date on which the notice was sent; and the address to which the notice was sent.
- The Secretary of State did not notify me at my last known address that my driver's license would be suspended for failing to pay any fine or penalty due and owing as a result of 10 or more violations of the municipality's vehicular standing and parking regulations established by ordinance.

**FOR ANY BOX CHECKED, PLEASE PROVIDE FACTS TO SUPPORT THE STATEMENT ON THE REVERSE SIDE OF THIS FORM.** (For more space, attach additional pages.)

**THE SECRETARY OF STATE CANNOT CONSIDER ANY ISSUES OTHER THAN THOSE LISTED ABOVE. IF THERE ARE OTHER ISSUES YOU FEEL SHOULD BE CONSIDERED, THOSE ISSUES MUST BE RESOLVED BY YOU WITH THE MUNICIPALITY.**

**A \$20 FILING FEE** payable to Secretary of State must accompany this request.

Under penalties provided by law pursuant to **Section 1-109 of the Illinois Code of Civil Procedure**, the undersigned certifies the statements in this Petition are true and correct.

\_\_\_\_\_  
Petitioner's Signature

\_\_\_\_\_  
Date

Send this Petition along with a check or money order payable to the Secretary of State for \$20 to either the Chicago or Springfield office listed above. **NO REQUEST WILL BE CONSIDERED WITHOUT THE FEE ATTACHED.** You will be notified of the date, time and place for your hearing.