



Metro

Los Angeles Metro Protective Services
Los Angeles County Sheriff's Department

PO Box 866015
Los Angeles, CA 90086-6015

213.92COURT (213.922.6878)
metro.net/transitcourt

DECLARATION OF INABILITY TO PAY WAIVER
REQUEST FOR WAIVER OF POSTING OF PENALTIES FOR ADMINISTRATIVE HEARING

INSTRUCTIONS: Please include this form and copies of documentation supporting the income level claimed below when submitting the Administrative Hearing Request Form to the address noted above.

A payment waiver is not used to grant exemptions from payment of violation fees on the grounds of financial hardship, nor is there any provision in current state law which permits a reduction in fines.

1. I am unable to pay the fine amount because:

2.

EMPLOYMENT Check one
HOUSEHOLD INCOME (monthly) Check all that apply
FINANCIALLY RESPONSIBLE FOR: Check all that apply
Includes checkboxes for employment status, household income sources, and financial responsibilities.

Name of current/most recent employer: If unemployed, months of employment:

ASSETS (VALUE) MONTHLY EXPENSES
Includes checkboxes for assets like Motor Vehicles, Home, Property, Savings, Checking, Cash on Hand, and monthly expenses like Rent/Mortgage, Utilities, Loans, Food, Transportation, Medical, Telephone, Cell Phone.

3. I am entering the following plea: Liable Not Liable

4. I am interested in the following options as I am experiencing financial difficulty:

- Transit School - 20-minute online tutorial which will result in a reduction of fines
Installment Payment Plan - payment of fines over a period of three months
Community Service - volunteer work hours in lieu of payment of fines

5. I state and declare, under the penalty of perjury, that the foregoing is true and correct.

Name: Signature: Date: