# City of Oakland

## Parking Citation Assistance Center



#### 250 Frank H. Ogawa Plaza, Suite 6300, Oakland, CA 94612

## Refund Request Form

Refunds are only provided when there is an overpayment on the license plate and there are no other open citations. If you feel you are due a refund, please fill out this form completely and legibly and provide proof(s) of payment. Acceptable proofs of payment are:

<u>Cash payment</u>: A copy of your cash receipt <u>Check payment</u>: A copy of the front and back of your cancelled check <u>Credit/Debit card payment</u>: A copy of the card statement showing the posted transaction <u>OMV payment</u>: A copy of the OMV receipt and itemized payment statement <u>FTB (Tax refund) seizure</u>: A copy of the FTB Notice of Intercepted Funds

### **Contact Information**

Name:		Ph	Phone#:	
Address:				
City:		State:	Zip Code:	
Email:				
Citation Information				
Citation#	Amount		Remarks	
		<u> </u>		
Signature:		Da	ate:	

You may submit your refund request and supporting documents by mail or in person to the address shown above or by fax to (510) 986-2699. **Please allow 4 to 6 weeks for processing.** If a refund is due you will receive a check by mail to the address you provided on this form. If you have not received a check after 6 weeks please call 1(800) 500-6484 to check the status of your request.

FOR OFFICE USE ONLY							
Reviewed by:	Date:	Eligible for refund?	Y N				
Amount of refund:	Notes:						