

Prospect Heights Police Department  
14 E. Camp McDonald Road  
Prospect Heights, IL 60070

Phone: (847)398-5511  
Fax (847) 398-6080

**Request For Citation Review**

Citation #: P \_\_\_\_\_

Citation Date: \_\_\_\_\_

This is a request for review of a local ordinance citation and does not mean the citation will be “voided” or “not processed” in the event of my request is denied. I have indicated below the circumstances, which I feel should be brought to the attention of the officer, and am requesting that my citation be voided based on those circumstances. **Complainant must retain the citation during this review process.**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Officer’s Star #: \_\_\_\_\_ Violation: \_\_\_\_\_

Complainant’s Statement of Circumstances (use reverse if needed): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Completed by Officer:

\_\_\_\_\_ Citation may be **Voided** based on circumstances indicated by Complainant

\_\_\_\_\_ Citation to **Remain in Force** requiring payment of fine or request court appearance

Officer’s Comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Officer’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
Based on your statement and after further review we have concluded the following outcome.

\_\_\_\_\_ Request has been approved based on the circumstance

\_\_\_\_\_ Request has been denied requiring payment of fine as indicated or court appearance

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Chief of Police)

To: \_\_\_\_\_

\_\_\_\_\_  
Citation #: P \_\_\_\_\_

\_\_\_\_\_