

Parlier Police Department  
Tow Hearing Request

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parlier P.D. Case #

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone #

\_\_\_\_\_  
Date vehicle was towed

\_\_\_\_\_  
Location of tow

\_\_\_\_\_  
Date notified

Reason for hearing request:


\*\*\*\*\* Office Use Only \*\*\*\*\*

\_\_\_\_\_  
Date/Time of Hearing

\_\_\_\_\_  
Hearing Officer

\_\_\_\_\_ Release Approved

\_\_\_\_\_ Release Denied

\* notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_