

TOW HEARING REQUEST

I hereby request a tow hearing from the City of Spring Hill, Kansas.

I am the owner of the below listed vehicle. YES NO (if no, please provide documented proof of financial interest in the vehicle):

Name: _____

Street Address: _____

City, State, Zip: _____

Phone Numbers: Home: _____

Work: _____

Cell: _____

Police Department Case Number (or Incident/Investigative Report Number): _____

Make, Year and Model of Vehicle Towed: _____

Date Towed: _____

Name of Tow Service: _____

Is vehicle currently impounded by Tow Service: YES NO

Amount of tow charges: \$ _____

State reason(s) you believe this tow was improper/illegal or any other reason unjustified. Attach paper if more space is needed: _____

The City of Spring Hill, Kansas will make reasonable attempts to schedule the tow hearing at a time mutually convenient for all parties. Failure to attend the scheduled tow hearing will be deemed a waiver of your request to challenge the validity of this tow.

Date

Signature of Requestor