

**FIRCREST MUNICIPAL COURT
Pierce County, Washington**

115 Ramsdell Street
Fircrest, WA 98466
Phone # 253-564-8922 Fax # 253-564-3645

CITY OF FIRCREST

vs

Respondent

_____,
Petitioner.

Civil Cause No:

**REQUEST FOR HARDSHIP
HEARING**

Accompanying Criminal Case: Defendant's Name: _____
Case No. _____

The above named petitioner hereby requests a hardship hearing before the Court for the following reason:

Dated and Signed this _____ day of _____, 20____.

Petitioner's Signature

HEARING DATE: _____ day of _____, 20____ at _____ am/pm.

**FIRCREST MUNICIPAL COURT
IMPOUNDED VEHICLE HARDHIP HEARING REQUEST**

PLEASE TAKE NOTICE that the undersigned person or person(s) request a hardship hearing with respect to the impoundment of the vehicle described below. This request is pursuant to the provisions of RCW 46.55.113 and Fircrest Municipal Code Chapter 9.10.

Petitioner's name _____

Address: _____ Phone: _____

City: _____ Zip Code: _____

Name of Defendant driving vehicle when car was impounded:

Full name

Legal/registered owner of vehicle: _____
Full Name

Address: _____

Vehicle: _____
Make/Model Year

Relationship between you and the Defendant driving the vehicle:
(How do you know this person?)

Do you and the Defendant reside together? Yes No

Towing Company: _____

Agency authorizing impound: City of Fircrest Police Officer

_____, 20____
Signature Date