



Department of Finance
200 E. Main Street, Suite B-001
Rochester, New York 14604
www.cityofrochester.gov

Parking and
Municipal Code
Violations Bureau

MOTION TO VACATE DEFAULT JUDGMENT

This form is to be used **ONLY** if you failed to appear at your scheduled hearing(s) and your case has entered default judgment. You must provide a valid reason to reopen your case.

- * A **non-refundable** \$50 administrative fee, made by cash, credit card, bank check or money order, is required to file this motion. Personal checks are not accepted.
- * Fill out this form completely. Do not leave any blanks; type **N/A** if it does not apply.
- * Use one form per case number.
- * Attach any evidence to support your testimony below.
- * Sign and date the application.
- * **Failure to sign, date and complete this form entirely may result in the denial of your motion.**

Submit your motion by mail or in person to:

**Parking & Municipal Code Violations Bureau
200 East Main Street, Suite B-001
Rochester, NY 14604**

Respondent's Contact Information

First name Last name

Address Address line 2

City State Zip code

Phone number E-mail

Case or Summons Information

Case Number Summons Number

Original Scheduled Hearing Date Second Scheduled Hearing Date (optional)

Have you previously filed a motion to vacate for this case?

Yes (DO NOT submit this form) No

SEE REVERSE

Explanation for Failure to Appear

- * explain in detail the grounds to vacate your judgment and attach any supporting documents/evidence
- * you may submit additional pages for your explanation

I, _____, certify under penalty of perjury that I am authorized to complete and submit this request, I have not previously submitted a "Motion to Vacate Default Judgment" for this case or violation, and that to the best of my knowledge, all information included on this form and the evidence provided are true.

Signature: _____

Date: _____

INTERNAL USE ONLY

Date Received: _____

By: (Clerk Initials) _____

Date Heard: _____

Motion: _____

Notes:

Senior Examiner Signature: _____

ID#: _____

Examiner Signature: _____

ID#: _____

Examiner Signature: _____

ID#: _____