

Department of Finance 200 E. Main Street, Suite B-001 Rochester, New York 14604-1794 www.cityofrochester.gov

## AUTHORIZATION RELEASE FOR HEARING(S)

	, am the registered owner of the
(Print Name)	
vehicle bearing license plate	By signing below, I hereby
authorize Ms./Mrs./Mr	to appear on my
behalf for hearings being conducted at	t Parking Violations Bureau, located at
42 South Avenue in the City of Rochest	ter, NY and County of Monroe.
	Signature of Registered Owner
State of New York)	
County of Monroe) ss.:	
Subscribed and sworn to me before this	NOTA DIVISITA DA VIDA
, Day of, 20	NOTARY STAMP HERE
Notary Public	
Notally 1 abile	

G/PVB/adjudicationforms/affidavit.park



Phone: 585.428.7482 Fax: 585.428.6538 TTY: 585.428.6054 EEO/ADA Employer