

Section A. CONTACT INFORMATION (Please print legibly)

Name			
Last	Firs	st	Middle
Date of Birth / /	Email Address		
	(if provide	d, email will be used to send c	ommunications regarding your citation)
Mailing Address			Apt. No
City	Sta	iteZip	Tel. ()

Section B. CITATION INFORMATION

A copy of your citation **MUST** be provided with this form. Call MTS Security at (619) 595-4960 to request a copy.

- 1. Citation Number _____
- 2. Citation Date _____

_____ (payment must occur within 120 days of citation date)

- 3. Please mark below the violation code section listed on your citation.
 - □ MTS Ordinance No. 2 / Public Utilities Code 120450 No Valid Fare
 - □ Penal Code 640 (c)(1) Fare Evasion
 - □ Penal Code 640 (c)(2) Misuse of Fare Pass

Citations with two (2) or more violations listed are <u>NOT</u> eligible for diversion. Citations for misuse of a reduced fare [Penal Code 640(c)(3)(A)] are <u>NOT</u> eligible for diversion. Contact MTS Security at (619) 595-4960 within 72 hours of being cited with valid proof of eligibility of reduced fare to have your confiscated pass returned and the citation voided.

Section C. SURVEY (optional)

Please provide the reason(s) why you did not have valid fare. Your responses are for informational purposes only, will not result in any additional enforcement actions, and will not have any effect on your participation in the Diversion Program.

Took Chance / Risked It

□ Other: _____

Did not know fare required

□ Lost Fare

- \Box Forgot fare
- $\hfill\square$ Cannot afford fare
- Thought fare was valid
- Don't know how to buy fare
- SECTION D. SIGNATURE

I certify to the best of my knowledge that the information on this form is true and correct. I understand that a payment of \$25.00 to MTS will be charged/processed to void the fare violation citation. I understand there are no refunds and that I cannot file a limited appeal with MTS after payment is processed.

(Parent/Legal Guardian must sign if applicant is under 18)

Date

Return completed form, along with \$25.00 payment and copy of citation, <u>in person</u> (cash, credit card or check/money order payable to "MTS") or <u>by mail</u> (check/money order payable to "MTS" only, do not mail cash) to: **MTS Transit Store**, **1255 Imperial Ave., Suite 100-A, San Diego CA 92101**. ID is required with check and credit card payments.

FOR OFFICE USE ONLY Staff Initials _____

_ POS/Transaction ID_

Date Payment Processed.

 \Box No time to buy fare

□ Mobile Phone Died

□ TVM broken