Cornwall
By-Law Services

Request for Screening Review

amps@cornwall.ca
Tel: 613-930-2787 ext. 2193
100 Water Street East, 2nd floor Cornwall ON K6H 6G4

All requests for screening must include a factual and detailed explanation of the reason(s) for your request. If you wish to support your Screening request with images or other documents, please include them with this request form. Applicants are responsible for completion and content on this form. For more information on AMPS visit www.cornwall.ca/amps/ .

Penalty Notice Recipient			
Name (first and last)		Phone Number	Address
City	Province	Postal Code	Email Address

Penalty Notice (infraction) (Please provide the information found on the Penalty Notice)		
Penalty Notice No.	Penalty Offence Date	Plate Number **or** Name on the Penalty Notice

Reason For Screening (you are required to provide specific reason(s)
- Please provide a short factual and detailed explanation of your reason(s) for your Screening request. (this will be discussed further at your Screening Review) - If you wish to support your Screening with images or other documentation, please bring them with you at your scheduled In-Person Screening or attach them to this request.

Attachment(s) included (please check relevant box): ☐ **Yes** ☐ **No**

Instructions for Submitting In-Person Screening Request Form

Please submit your completed form to the City of Cornwall by:

a) In Person to The City of Cornwall, Building and By-Law Division, 100 Water Street East 2nd floor Cornwall, ON K6H 6G4
b) Emailed your saved and scanned copy or Fillable form to: amps@cornwall.ca

Statement of Penalty Notice Recipient	
I represent and warrant that: ☐ I am the registered owner of the vehicle or person named on the Penalty Notice; or ☐ I am a third-party agent authorized in writing to act on behalf of the vehicle owner named in the penalty notice and I will provide written authorization of such to the Screening Officer. **Consent Form** ☐ I acknowledge that if I fail to appear and to remain at my scheduled In-Person Screening until my matter has been determined by the Screening Officer, I will be deemed to have abandoned my request for a Screening, the Administrative Penalty will be affirmed, and I will be liable for an additional **non-appearance fee** as per the AMPS By-Law, and Personal information obtained through use of this form is collected and used for the purpose of administering legal process pursuant to the *Municipal Act*.	
Signature mandatory to schedule a Screening Review (ownership is required at time of screening)	
Signature	Date

Screenings will be held on Tuesday, Wednesday, and Thursday, at the times specified below.

Complete this section to attend an In-Person Screening
• Please check your preferred Screening appointment day and time below. • Screenings will be scheduled for the next available day selected. • Your preference for a date and time will be considered but cannot be guaranteed. • If submitting your request by email, a notice will be sent to you confirming the date and time of your Screening appointment. • In-Person Screening appointments cannot be rescheduled or adjourned. • If you fail to attend your Screening Review, an administration fee will be added to the penalty amount.

Please check off your desired day and time	
Tuesday	☐ 11:30 a.m. ☐ 11:45 a.m. ☐ 12:00 p.m. ☐ 12:15 p.m. ☐ 12:00 p.m. ☐ 12:15 p.m.
Wednesday	☐ 9:00 a.m. ☐ 9:15 a.m. ☐ 9:30 a.m. ☐ 9:45 a.m. ☐ 10:00 a.m. ☐ 10:15 a.m.
Thursday	☐ 1:30 p.m. ☐ 1:45 p.m. ☐ 2:00 p.m. ☐ 2:15 p.m. ☐ 2:30 p.m. ☐ 2:45 p.m.

FOR INTERNAL USE ONLY		
Application Received	**Appointment Information**	
Date Stamp:	Appointment Date:	Appointment Time:
	Notified by: ☐ Email ☐ Phone ☐ In Person	Date Notified:

Personal information contained on this form is collected and will be used for the purpose of administering the City's Administrative Penalty process. Questions about this collection should be directed to the City of Cornwall at 613-930-2787 ex. 2193 or emailed to: amps@cornwall.ca