

**Part 1: Applicant Information** 

PO Box 9060 Stn Main Surrey BC V3T 0N4 Toll Free: 1-855-502-5494 Lower Mainland: 604-502-5493 Fax: 604-591-5611

## APPLICATION FOR ADMINISTRATIVE MONETARY PENALTY HEARING

Community Safety Unit Form No. CSU130

## **INSTRUCTIONS:**

Please complete all applicable fields and submit the completed application form to the Community Safety Unit. This form can be completed online and printed. If you have any questions about this application form, please contact the Community Safety Unit at 604-502-5493 (lower mainland) or 1-855-502-5494 (toll free).

The deadline for the Community Safety unit to receive an Application for Administrative Monetary Penalty Hearing is 30 calendar days from the date that you received a Notice of Administrative Monetary Penalty (see section 41 of the *Cannabis Licensing Regulation* for rules regarding how to determine when a Notice of Administrative Monetary Penalty was received). Important: If the Community Safety Unit does not receive a completed Application for Administrative Monetary Penalty Hearing by that deadline a written review will be conducted based on the information currently available to the decision-maker which may result in a Compliance Order being issued against you.

For complete details about the process, please review the Administrative Monetary Penalty Policy on our website: www.gov.bc.ca/Community-Safety-Unit.

**Note**: If you would like an individual to represent you and have the CSU share your personal information with your representative, please complete the appropriate Authorization of Representative Form found on our

Legal Name of Applicant	Position (if applicable)		
Telephone	Fax		
Email			
Mailing Address	City	Province	Postal Code
Community Safety Unit File Number	Notice of Administrative Monetary Penalty Number		
☐ I disagree with the Notice of Administrative Monetary Penalty and would like to participate in an administrative hearing process whereby I will be given the opportunity to review the CSU's information and provide my own information, before the decision is made regarding a monetary penalty.			
Part 2: Signature			
Signature of Applicant or authorized signatory of the Applicant		Date (mm/dd/yy)	
This form must be signed by an individual with the appropriate authority.			
The information requested on this form is collected by the Community Safety Unit under Section 26(b) and (c) of the <i>Freedom of Information and Protection of Privacy Act</i> and will be used for the purpose of compliance and enforcement matters in accordance with the <i>Cannabis Control and Licensing Act</i> . Should you have any questions about the collection, use, or disclosure of personal information, please contact the Freedom of Information Officer at PO Box 9292 STN PROV GVT, Victoria, BC, V8W 9J8 or by phone toll free at 1-866-209-2111.			
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## APPLICATION FOR ADMINISTRATIVE HEARING

Community Safety Unit Form No. CSU130

Mail, email or fax this completed form to:

Director, Community Safety Unit PO Box 9060 Stn Main Surrey BC V3T 0N4

Email CSU@gov.bc.ca

Fax number 604-591-5611