



CITY OF HEMET  
 Code Compliance Division  
 445 E. Florida Avenue • Hemet, CA 92543  
 Phone (951) 765-2339 ▪ Fax (951) 765-2359

**ABANDONED VEHICLE ABATEMENT PROGRAM (AVA)**

*Authorization form to request the removal of inoperative, wrecked, dismantled or abandoned vehicle(s) on private property through the AVA Program.*

I hereby request the following vehicle(s) described below to be removed from:

\_\_\_\_\_ Address and/or Assessor Parcel Number

Under penalty of perjury I deny responsibility for the presence of the vehicle(s) and/or disclaim any future interest in the vehicle(s). In requesting the City of Hemet to remove the vehicle(s), I understand and agree that I am relieving the City of Hemet and its agents from any and all liability.

**Vehicle 1:**

\_\_\_\_\_ License Plate Number      \_\_\_\_\_ State      \_\_\_\_\_ Vehicle Identification Number (VIN)

\_\_\_\_\_ Year      \_\_\_\_\_ Make      \_\_\_\_\_ Model      \_\_\_\_\_ Body Type      \_\_\_\_\_ Color

**Vehicle 2:**

\_\_\_\_\_ License Plate Number      \_\_\_\_\_ State      \_\_\_\_\_ Vehicle Identification Number (VIN)

\_\_\_\_\_ Year      \_\_\_\_\_ Make      \_\_\_\_\_ Model      \_\_\_\_\_ Body Type      \_\_\_\_\_ Color

**Vehicle 3:**

\_\_\_\_\_ License Plate Number      \_\_\_\_\_ State      \_\_\_\_\_ Vehicle Identification Number (VIN)

\_\_\_\_\_ Year      \_\_\_\_\_ Make      \_\_\_\_\_ Model      \_\_\_\_\_ Body Type      \_\_\_\_\_ Color

Check as applicable:

Property Owner/Agent of     Tenant     Registered Owner of Vehicle     Legal Owner of Vehicle

Print Name: \_\_\_\_\_

Mailing Address (if different from above): \_\_\_\_\_

Contact Phone and/or email: \_\_\_\_\_

\_\_\_\_\_ Signature

\_\_\_\_\_ Date