



Judge Michael Easton
Municipal Court

MUNICIPAL COURT IID COST REDUCTION HEARING REQUEST
MCR201 (rev. 03/16)

DATE: _____

I, _____ am requesting

a hearing regarding Ignition Interlock cost reduction due to financial hardship.

Attached to this document, please find my fully completed Application for IID Cost Reduction and Vehicle Exemption Document.

(signature)

Name (please print)

Address

City, State, Zip