

PFF:km  
9-02.ord  
02/23/10



ORDINANCE NO. 4942

**THE BOARD OF SUPERVISORS OF THE COUNTY OF EL DORADO DOES  
ORDAIN AS FOLLOWS:**

Section 1. Section 9.02.380 of Chapter 9.02 of Title 9 of the El Dorado County Ordinance Code is hereby amended to read as follows:

9.02.380 Procedures for Requesting an Administrative Hearing.

- (a) No hearing to contest an administrative citation shall be held unless and until a request for hearing form provided by the County has been completed and submitted with a hearing fee and the administrative fine. The refundable hearing fee shall be two hundred dollars (\$200.00) payable to El Dorado County to defray the cost of the hearing and may be changed by resolution of the Board of Supervisors. The request shall state the grounds for requesting the hearing and be filed with the Code Enforcement Unit on or before 10 calendar days after service of an administrative citation or notice to abate.
- (b) Any person appealing an administrative citation shall deposit the refundable hearing fee and the administrative citation fine being appealed. Any hearing fee and administrative citation fine which has been deposited shall be refunded if it is determined, after a hearing, that the person charged in the administrative citation was not responsible for the violation(s) or that there was no violation(s) as charged in the administrative citation. If the hearing officer affirms the violation, the hearing officer may impose administrative fees per 09.02.450 equal to the cost of administering the Code Enforcement case.

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Section 2. This ordinance shall become effective thirty (30) days following adoption hereof.

PASSED AND ADOPTED by the Board of Supervisors of the County of El Dorado at a regular meeting of said Board, held on the 23 day of March, 2010, by the following vote of said Board:

Ayes: John R. Knight, James R. Sweeney,  
Raymond J. Nutting, Ron Briggs, Norma Santiago

**ATTEST**

**SUZANNE ALLEN DE SANCHEZ**

Clerk of the Board of Supervisors

By

  
Deputy Clerk

Noes: None

Absent: None

  
Chairman, Board of Supervisors

Norma Santiago

**I CERTIFY THAT:**

THE FOREGOING INSTRUMENT IS A CORRECT COPY OF THE ORIGINAL ON FILE IN THIS OFFICE

**Date** \_\_\_\_\_

**ATTEST:** SUZANNE ALLEN DE SANCHEZ, Clerk of the Board of Supervisors  
of the County of El Dorado, State of California.

By \_\_\_\_\_

Deputy Clerk