



RESPONSE TO APPEAL

*Use this form to respond to an appeal filed by the other party in your case.
You will use this form to tell the Appeals Unit why the judge's decision was right.
Please read the instructions carefully.*

DOCKET NO: _____

DATE: _____

NAME ON NOTICE OF VIOLATION: _____

INFORMATION ABOUT YOU

LAST NAME: _____ MAILING ADDRESS: _____

FIRST NAME: _____ CITY: _____ STATE: _____ ZIP CODE: _____

MIDDLE INITIAL: _____ COUNTRY: _____ PHONE NUMBER: _____

E-MAIL: _____

WHO ARE YOU: *(please check a box below)*

- Respondent Partner/Officer of respondent company Employee of respondent
- Petitioning Agency (DOHMH) Owner of property/business General/Managing agent
- I work for _____ who is the general/managing agent
- Other (friend, relative etc), describe: _____
- Registered Representative (include number): _____

MAILING ADDRESS WHERE YOU WOULD LIKE THE DECISION TO BE MAILED

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

COUNTRY: _____

YOUR RESPONSE MUST BE RECEIVED WITHIN 30 DAYS* OF THE DATE ON THE APPEAL.

**If you received the appeal by mail, you are allowed 5 extra days to respond.*

