



REQUEST FOR APPEAL EXTENSION AND/OR HEARING RECORDING

USE THIS FORM TO REQUEST:

- MORE TIME TO APPEAL; OR
THE AUDIO RECORDING OF THE HEARING IN ORDER TO REVIEW BEFORE APPEALING.

RESPONDENTS MUST COMPLETE THE FORM AND:

- SERVE (MAIL) A COPY ON THE ENFORCEMENT AGENCY RESPONSIBLE FOR THE SUMMONS(ES)/NOTICE(S);
FILE A COPY WITH THE OATH HEARINGS DIVISION AT THE ADDRESS ABOVE.

ENFORCEMENT AGENCIES MUST COMPLETE THE FORM AND:

- SERVE (MAIL) A COPY ON THE RESPONDENT;
FILE A COPY WITH THE OATH HEARINGS DIVISION AT THE ADDRESS ABOVE.

Information About the Summons(es)/Notice(s) and the Person Completing This Form

If a representative is listed, the Hearings Division will mail the determination on this request to the representative at the representative's address. If a representative is not listed, the Hearings Division will mail the determination to the address listed below.

Summons/Notice Number(s) (use an extra page if needed):

Name on Summons(es)/Notice(s): Name of Requestor:

Relationship to Respondent (if applicable):

Mailing Address: (Registered Representatives must attach Authorization to Appear Form)

City, State: Mailing Address:

Zip Code: City, State: Zip Code:

Telephone Number: Telephone Number:

Email Address: Email Address:

This Request Is For (check one):

An extension of time to file an appeal. The request must be supported by evidence of impossibility or other explanation of inability to file timely. Explain:

Blank lines for explaining the request for extension of time.

An audio recording of the hearing. The request will be rejected if it is received more than 30 days from the date of the hearing decision, or more than 35 days if the hearing decision was mailed.

I will pick up the CD(s), at the cost of 25 cents per CD Mail the CD(s), for \$3.00, to the address provided above

Email the audio, at no cost, to the email address(es) provided above

When the audio recording is provided to you, you will be given an extra 30 days to serve and file your appeal. Please note that the Hearings Division prepares audio recordings at the rate of 25 cents per CD for recordings that are picked up and \$3.00 for recordings that are mailed. The Hearings Division will contact you with the total cost for preparing the audio once your request is processed. There is no cost for recordings that are emailed.

(TURN OVER. YOU MUST COMPLETE THE NEXT PAGE)

RESPONDENTS ONLY – YOU MUST COMPLETE PROOF OF PAYMENT AND PROOF OF SERVICE BELOW

1) Has the penalty been paid?

- The penalty has been paid in full or payment of the full penalty has been waived by the agency. YES NO

*The penalty must be paid in full within 30 days of the date of the hearing decision, or 35 days if the decision was mailed; otherwise your appeal will be rejected. **Filing this request does not extend the time to pay the penalty.***

Vehicle for Hire and Taxi Cases: Payment or waiver is not required if the summons/notice is for a violation of a law or regulation enforced by the TLC.

Consumer Cases: Even if full payment of the penalty has been waived, if the Hearing Officer's decision orders the payment of restitution, the respondent must deposit the amount of restitution with the Department of Consumer Affairs.

- The respondent is requesting a waiver of payment of the penalty because it will be a financial hardship to pay while the appeal is being decided. YES NO

*You **MUST** attach proof of hardship, such as the first two pages of the respondent's Federal tax return, and explain below how paying the penalty now would be a financial hardship for the respondent.*

2a) I am sending a copy of the request to (check the box next to the agency that you are sending the copy of the request to):

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> Building Cases:
Dept. of Buildings
Administrative Enforcement Unit 280
Broadway, 5 th Floor
New York, NY 10007 | <input type="checkbox"/> Sanitation, Recycling, Posting & Abandoned Vehicle Cases:
Department of Sanitation
Bureau of Legal Affairs
125 Worth Street, 7 th Floor
New York, NY 10013 | <input type="checkbox"/> Fire Code Cases (including fireworks):
FDNY Legal Enforcement Unit
Bureau of Legal Affairs
9 Metrotech Center, 4 th Floor
Brooklyn, NY 11201 | <input type="checkbox"/> Health Code, Restaurant, Food Vendor, & SRO Cases
DOHMH General Counsel
42-09 28th Street, 14 th Floor CN-30
Long Island City, NY 11101-4132 |
| <input type="checkbox"/> Air, Noise, Water, RTK, HazMat & Sewer Cases:
DEP General Counsel
59-17 Junction Blvd, 19 th Floor
Flushing, NY 11373-5108 | <input type="checkbox"/> Transportation Code & Newsrack Cases:
Dept. of Transportation
c/o Asst. Commissioner, HIQA
55 Water Street, 7 th Floor
New York, NY 10041 | <input type="checkbox"/> Parks Department, Hudson River Park & Battery Park City Cases:
Parks Dept. Counsel's Office
The Arsenal, 830 5 th Avenue
New York, NY 10065 | <input type="checkbox"/> Public Pay Telephone Cases:
DOITT Customer Service Coordinator
Public Pay Telephones
75 Park Place, 9th Fl.
New York, NY 10007 |
| <input type="checkbox"/> Markets Cases:
Business Integrity Comm., Gen. Counsel
100 Church Street, 20 th Floor
New York, NY 10007 | <input type="checkbox"/> Consumer & General Vendor Cases:
Dept. of Consumer Affairs, General Counsel
42 Broadway, 8 th Floor
New York, NY 10004 | <input type="checkbox"/> Landmarks Cases:
Landmarks Preservation Commission
Municipal Bldg., 1 Centre St., 9th Fl., North
New York, NY 10005 | <input type="checkbox"/> Taxi & For-Hire Vehicle Cases:
NYC Taxi & Limousine Commission
Falchi Bldg., 31-00 47th Ave.
Long Island City, NY 11101 |

The request will be rejected unless you send a copy of the completed request, including any attachments, to the enforcement agency responsible for the summons(es)/notice(s). Note: If the respondent is requesting a hardship waiver, do not send the enforcement agency copies of the proof of hardship.

2b) You can prove that you sent a copy of the request to the agency by checking the box next to the enforcement agency in Step 2a above AND completing and signing the statement below.

I [print your name] _____, RESIDING AT [your address] _____, CERTIFY UNDER PENALTY OF PERJURY THAT I AM AUTHORIZED TO SUBMIT THIS REQUEST, THAT TO THE BEST OF MY KNOWLEDGE ALL INFORMATION I INCLUDED ON THIS FORM AND IN THE ATTACHMENTS, IF ANY, IS TRUE, AND THAT ON [date] _____ I SENT A COPY OF THIS REQUEST TO THE ENFORCEMENT AGENCY RESPONSIBLE FOR THE SUMMONS(ES)/NOTICE(S) AT ITS ADDRESS LISTED ABOVE BY PLACING IT IN A U.S. POSTAL SERVICE MAILBOX OR BY OTHER MAILING SERVICE.

YOUR SIGNATURE: _____

ENFORCEMENT AGENCIES ONLY

Enforcement agencies must attach a separate affirmation indicating service on the respondent.