



APPEAL FORM

- Use this form only if you want to appeal the decision from your hearing.
- If you disagree with an Inquest Determination, you must file a Motion to Vacate form.

GENERAL INSTRUCTIONS FOR COMPLETING THE APPEAL

1. If you want to appeal the judge's decision, you must file an appeal within thirty (30) calendar days of the date of the decision.
2. You must complete both sides of this form and sign your name in the appropriate signature box. Two copies of the form and attachments must be submitted.
3. If you wish to request a copy of the audio recording of the hearing before you file an appeal, you must do so within 7 calendar days of the date of the decision. You must make your request in writing on a "[Request for Audio Recording of Hearing](#)" form to:
 OATH Taxi and Limousine Tribunal
 Attn: Appeals Unit
 32-02 Queens Boulevard, 3rd Floor
 Long Island City, NY 11101-2324
 If your request for the audio recording is timely, you will have thirty (30) calendar days from the date of the decision or twenty-one (21) calendar days from the mailing of the recording by the Taxi and Limousine Tribunal (whichever is greater) to file your completed application for appeal.
4. Only the respondent, or an authorized representative of the respondent, may file an appeal. See Section 8, Required Attachments, item C for more information on authorized representatives.
5. Questions may be directed to 718-391-5718.

1. RESPONDENT INFORMATION (Please Print Clearly)

Name: _____ Address: _____ Apt.: _____

City: _____ State: _____ Zip _____ TLC License
 No./I.D.No. _____

E-mail: _____

2. SUMMONS(ES) YOU BELIEVE SHOULD BE REVERSED OR MODIFIED

Does this appeal concern an order of suspension or revocation of your license? Yes No

Hearing Date	Summons Number(s) Appealed	Rule Violation(s)
A. _____		
B. _____		
C. _____		
D. _____		
E. _____		

Use additional sheets if needed.

4. REASON WHY YOU BELIEVE THE JUDGE'S DECISION SHOULD BE REVERSED OR MODIFIED

You must write a brief statement including specific reasons why the decision is incorrect. You may only rely on facts or evidence or arguments that were used at the hearing. The Appeals Unit will not use new facts and arguments to decide your appeal. Print clearly, and use additional sheets if needed.

Empty rectangular box for writing the reason for appeal.

5. APPELLANT'S SIGNATURE (The person appealing)

I am: Respondent
 A representative of the Respondent

Print Name

 _____ Date: _____
Signature

6. MAILING ADDRESS DIFFERENT FROM RESPONDENTS ADDRESS

If you want the decision mailed to an address different from the Respondent's address, please indicate the address:

ADDRESS: _____
City: _____ State: _____ Zip Code: _____

7. REFUND INFORMATION

If your appeal is successful, you may request a refund of any payment(s) already made on the fines imposed.

8. REQUIRED ATTACHMENTS

In order to process your appeal, you must attach the following documents to the Appeal Form:

- A. A copy of the original **Notice of Summons Disposition** (also called the decision) or the **Motion to Vacate Judgment** (if applicable).
- B. A copy of exhibits presented at the hearing which you want considered on appeal.
- C. If you are a representative of the respondent: you must submit a signed notarized letter of authorization from the respondent or a signed notarized Power-of-Attorney form.

MAILING PROCEDURES

- MAIL APPEAL FORM AND ATTACHMENTS TO: OATH Taxi and Limousine Tribunal
Attn: Appeals Unit
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Long Island City, NY 11101-2324