



OFFICE OF ADMINISTRATIVE TRIALS AND HEARINGS
Hearings Division

AUTHORIZATION FOR REGISTERED REP. OR ATTORNEY TO APPEAR

- To have a Registered Representative or attorney to appear at the OATH Hearings Division on your behalf, you must provide the Registered Representative or attorney with a completed copy of this form.
Answer every question in the space provided.
You and the Registered Representative or attorney should each retain a copy of the completed form for your records.
OATH does not endorse or qualify any Registered Representatives or attorneys.

Information About the Notice(s) or Summons(es)

Name of Respondent, as it is written on the notice(s)/summons(es):

Respondent's CAMIS, Docket, or TLC license number (if applicable):

I authorize the Registered Representative/attorney to appear on [check one]:

- Notice/Summons number(s):
If you need more space, please attach a list of the notice/summons numbers. Indicate total number of notices/summons:
All notices/summons issued to the respondent. This authorization remains in effect for two years from the date of your signature unless you notify the OATH Hearings Division in writing that the Registered Representative or attorney is no longer authorized to represent the respondent.

Information About the Person Authorizing the Registered Rep. or Attorney to Appear

Your name:

Your mailing address: City, State: Zip Code:

Telephone Number: Email Address:

Are you the named Respondent on the notice(s)/summons(es)? YES NO

If you are not the named Respondent, check the box that best describes who you are:

- Owner of property/business
General/Managing agent (or employee)
Employee of respondent
Partner/officer of respondent company
Other (friend, relative, etc.), describe

Information About the Registered Rep. or Attorney (To be supplied by Registered Rep. or Attorney)

Registered Representative or attorney's name:

Business mailing address: City, State: Zip Code:

Telephone Number: Email Address:

AUTHORIZATION STATEMENT

Person authorizing Registered Representative or Attorney must check the appropriate box next to each question

I, [your name], hereby acknowledge that [registered representative or attorney] informed me of the following:

- 1) That the Registered Representative or attorney is not an employee of OATH. YES NO
2) That if this is a Registered Rep, the Registered Rep has not represented themselves as an attorney. YES NO
3) That the respondent may appear at the OATH Hearings Division without a Registered Rep. or Attorney. YES NO
4) What the potential penalty is for the charge(s), should the respondent be found in violation. YES NO
5) That the notice(s)/summons(es) may be adjourned to another date. YES NO
6) The amount of the fees the Registered Representative will be charging. YES NO

I hereby authorize [registered rep. or attorney] to appear at the OATH Hearings Division.

Signature

Date