OFFICE OF ADMINISTRATIVE TRIALS AND HEARINGS
Hearings Division

Hearings Division
31-00 47th Avenue, 3rd Floor
Long Island City, NY 11101

REQUEST FOR AUDIO RECORDING OF HEARING

YOU MUST SUBMIT THIS REQUEST WITHIN SEVEN DAYS OF THE DATE OF THE HEARING OFFICER'S DECISION

Date of Request:	Date of Hearing:
Respondent Name:	TLC License Number:
Summons Number(s):	
LOCATION OF HEARING: ☐ Long Island City ☐ JFK ☐ John Street	Name of OATH Hearing Officer:

REQUESTER'S NAME AND ADDRESS (or address where you want recording mailed):

I am:
- ☐ Respondent
- ☐ Respondent's Representative
- ☐ Registered Representative (include number_____)
- ☐ Respondent's Attorney
- ☐ Petitioner

_____
Print Name

_____
Street / Apartment Number City State Zip Code

_____
Signature Date

☐ If you prefer to have an audio file sent to you by e-mail, print e-mail address below:

_____

Please note that large files cannot be sent to you by e-mail and a CD will be mailed to you instead.

This request for a copy of the audio recording of the hearing IS NOT AN APPEAL. If you wish to appeal, you must file a separate letter of appeal. The appeal must be filed within 30 days of the Decision Date or within 21 days of the mailing of the recording by the Tribunal, whichever is longer.

MAIL OR IN-PERSON	E-MAIL	FAX
OATH Hearings Division Attn: Appeals Unit 31-00 47th Avenue, 3rd Floor Long Island City, NY 11101	AudioRequest@oath.nyc.gov	718-391-5684