APPEAL FORM

If you have received a Notice of Violation (NOV), orders, decision, or other determination related to Fire Code violations, you have the right to appeal.

Complete this form and return it, along with the required filing fee of $110.00 and supporting documentation to the address above. Appeals may be submitted in person or by mail but must be received by the Fire Prevention Bureau no later than fourteen (14) calendar days from the date on the letter accompanying this form. **Appeals Forms submitted without the required Filing Fees will be rejected.** All future correspondence pertaining to this appeal will be sent via email only, unless indicated below that you do not agree.

<table>
<thead>
<tr>
<th>Filing Date:</th>
<th>Inspection Record #:</th>
<th>Inspection Reference #:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Property Address:</td>
<td></td>
<td>Oakland, CA 946___</td>
</tr>
<tr>
<td>APN (Parcel #):</td>
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</table>

Appellant Name:

Appellant Mailing Address:

Appellant Phone Number:

Appellant Email Address:

Property Owner Name (if different):

Property Owner Mailing Address:

Property Owner Phone Number:

Property Owner Email Address:

**NON-ATTORNEY REPRESENTATIVES MUST PROVIDE NOTARIZED AUTHORIZATION**

Representative/Attorney (if any):

Representative/Attorney Mailing Address:

Representative/Attorney Phone Number:

Representative/Attorney Email Address:

☐ I do not agree to receive future correspondence pertaining to this appeal by email.
How to Appeal:

Complete and submit this form, along with all required filing fees, to the Fire Prevention Bureau. The Deadline to Respond shall be fourteen (14) calendar days from the date of the letter accompanying this form except in cases involving danger, imminent hazard, or unsafe building, in which case the deadline to Respond shall be seven (7) days.

<table>
<thead>
<tr>
<th>Appeal Type</th>
<th>Filing Fee</th>
</tr>
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<tbody>
<tr>
<td>Fire Code Appeal</td>
<td>$110.00</td>
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If you are filing an appeal after the deadline to respond, explain why your appeal is past the deadline and why it should still be considered. Failure to adequately explain untimely filing may result in the appeal being summarily dismissed without a hearing.

Appeals Process:

A hearing will be scheduled with an Independent Hearing Officer. If the Independent Hearing Officer rules in your favor and grants your appeal, you will not be charged for the appeal filing fee, hearing officer costs, or any other fees paid from the inspection process being appealed. If the Hearing Officer denies your appeal, you must abate the violations and pay all administrative costs for the hearing as follows:

**Conduct Appeals Hearing = $150.00 an hour (Actual Cost)**

Notice of the date, time, and place of hearing will be sent to the appellant and the property owner by mail at least seven (7) calendar days prior to the hearing. At the hearing, you may present evidence and testimony to support your appeal.

Decisions of the Independent Hearing Officer may be appealed to an Appeals Board within fourteen (14) calendar days by following the procedures set forth in Oakland Municipal Code 15.04.125G. Appeals not filed in a timely manner will be rejected.

Please respond to the following:

1) A brief statement setting forth the legal interest of the party or parties in the real property identified in the order, decision or determination made by the Fire Code Official;

2) A brief statement in ordinary and concise language of that (those) specific order(s), decision(s) or determination(s) appealed;

3) A brief statement in ordinary and concise language, together with any material facts to support that contention that the intent of this code or the rules legally adopted hereunder have been incorrectly interpreted, the provisions of this code do not fully apply, or an equivalent method of protection or safety is proposed;

4) The signature of the property owner, and his or her mailing address; and

5) A declaration made under penalty of perjury, of at least one person requesting a hearing, as to the truth of the matters stated in the request for administrative hearing appeal.
Write your explanation below and/or attach supplemental pages as needed.

_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

I Declare under Penalty of Perjury that the information given herewith in all respects is true and accurate to the best of my knowledge and belief.

<table>
<thead>
<tr>
<th>Appellant Name:</th>
<th>Appellant Signature:</th>
<th>Date:</th>
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<table>
<thead>
<tr>
<th>Representative Name:</th>
<th>Representative Signature:</th>
<th>Date:</th>
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For Office Use Only

<table>
<thead>
<tr>
<th>Record ID(s):</th>
<th>Administrative Reviewer(s):</th>
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Received Date: