



Tel: (202) 442-9094 · Fax: (202) 442-4789 · Email: oah.filing@dc.gov

Request for a Hearing to Contest a Taxicab or For-Hire Vehicle Ticket

Use this form if you want a hearing before an Administrative Law Judge to contest a taxicab or for-hire vehicle ticket. Please first check the ticket to make sure it is for a **Title 31 violation**. If the ticket is for a Title 18 violation, you must request a hearing with the Department of Motor Vehicles (DMV). For Title 31 violations, you may use this form to contest a ticket and request a hearing with the Office of Administrative Hearings (OAH). **Please attach a copy of the ticket or include the ticket number on this form.**

Section 1 – Contact Information

Print Your Name:	Your Mailing Address:
Your Telephone:	
Your Email Address (<i>if any</i>):	Your Ward (<i>if you know</i>):
□ I consent to receive documents by email only	
If you have a representative for this case:	
□ Non-Attorney Representative (as allowed by OAH Rule 2835) □ Attorney	
Representative Name:	Representative Telephone:
Representative Email Address:	Representative Mailing Address:
□ Consents to receive documents by email only	

Section 2 – Ticket Information

Ticket Number: _____

Brief Description of Violation:

Section 3 – Why do you need a hearing?

I want to:

- **Deny** the violation and be scheduled for a hearing.
- □ Admit the violation but give a written explanation. This is called a "hearing by mail" and normally does not involve attending a scheduled hearing.

In the space below, give your written explanation or a brief description of why you deny the violation and explain what you want the judge to do. Use an additional page if needed. For an "Admit with Explanation" answer, you may also include supporting documentation.

Section 4 – Language Access

If scheduled for a hearing, do you need OAH to provide an interpreter to help you participate?

 \Box YES \Box NO

If YES, what language do you need?

Section 5 – Reasonable Accommodation

If scheduled for a hearing, do you need a reasonable accommodation to help you participate?

 \Box YES \Box NO

If YES, please explain:

Section 6 – Who Prepared the Hearing Request?

Signature of the person who prepared the hearing request:

Signature

Print Name

Date

Email, telephone, mailing address of person who prepared hearing request (if not printed above):