



**DISTRICT OF COLUMBIA**  
**OFFICE OF ADMINISTRATIVE HEARINGS**  
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## Answer to a Notice of Violation or Notice of Infraction

*Use this form to answer a Notice of Violation or Notice of Infraction from a D.C. enforcement agency, such as the Department of Public Works (DPW) or the Department of Buildings (DOB), among others. **Please attach a copy of the notice or include the notice number on this form.***

### Section 1 – Contact Information

Respondent Name:	Respondent Mailing Address:
Respondent Telephone:	
Respondent Email Address <i>(if any)</i> :  <input type="checkbox"/> Consents to receive documents by email only	Respondent Ward <i>(if known)</i> :
<i>If there is a representative for this case:</i>  <input type="checkbox"/> Non-Attorney Representative (as allowed by OAH Rule 2835) <input type="checkbox"/> Attorney	
Representative Name:	Representative Telephone:
Representative Email Address:  <input type="checkbox"/> Consents to receive documents by email only	Representative Mailing Address:

### Section 2 – Notice Information

Notice Number: \_\_\_\_\_

Brief Description of Violation: \_\_\_\_\_

Have you received a **Stop Work Order** in connection with the Notice?       Yes       No

If **yes**, what is the date of the Stop Work Order? \_\_\_\_\_

If the notice requires abatement, did you complete the required actions?       Yes       No       N/A

### 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.

→ → → **Continue to second page** → → →

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 documents with your answer.

#### **Section 4 – Language Access**

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

Yes     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?

Yes     No

If yes, please explain: \_\_\_\_\_

#### **Section 6 – Who Prepared this Answer?**

Signature of the person who prepared the answer:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
\_\_\_\_\_