

1900 SW 4th Avenue, Room 3100, Portland, OR 97201 www.portlandoregon.gov/hearings

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fax: 503.823.4347

## REQUEST TO RESCHEDULE FORM

NOTE: A hearing will not be cancelled (instead of rescheduled) unless the appeal is withdrawn by the appellant.

- If you are a party to a hearing and would like to request a reschedule, you are required to fill out and sign this
- This form must be received in the Hearings Office at least 48 hours prior to the date and time of your scheduled hearing (not including Saturday, Sunday, or recognized City of Portland holidays).
- The Hearings Officer will determine whether to grant any reschedule request.
- The Hearings Office will not contact you to tell you the status of your request. It is your sole responsibility to timely inquire. Do not assume your request was granted.
- If this matter settles, please notify the Hearings Office immediately.

1.	Hearings Office Case Number:			
2.	Your Name:			
	Name of Party (if different):			
	Your Mailing Address:		Unit/Apt. #:	
	City:	State:	Zip Code:	
	Your email address:			
	Your Daytime Te	our Daytime Telephone Number (with area code):		
3.	Scheduled Hearing Date:			
4.	If you have a tow hearing scheduled, is the vehicle still in storage with the tow company?			
т.	*Yes No *Appellant is responsible for all storage costs from date/time of origina scheduled hearing. Initial acknowledgement (required)			
5.	Reason why you are requesting the hearing to be rescheduled (Attach additional sheets, if need			
Sig	nature:		Date:	
part grou activ acco	cicipation in, denied to unds of race, color, na vities, the City of Port ommodations, auxilia	the benefits of, or be subjected to dis ational origin, or disability. To help e tland reasonably provides: translatio	y of Portland that no person shall be excluded from scrimination in any City program, service, or activity on the nsure equal access to City programs, services, and n and interpretation services, modifications, e format. For these services, complaints, and additional 68, or use Oregon Relay Service: 711.	
		For Hearings Office Use Only		
	П н	learing Reschedule approved.	Hearing Reschedule denied.	
	Revie	ewing Hearings Officer's Initials:	Date:	