

ATTORNEY/AUTHORIZED REPRESENTATIVE: An Attorney or a representative is ***NOT*** required for the Petition for Review process.

Do you have an attorney or another person representing you for this Petition for Review?

YES NO

If yes, please have your attorney submit a NOTICE OF APPEARANCE to the Commission Office and Department

A. ATTORNEY:

Name/Firm: _____

Firm Address: _____

Email: _____

Signature of Attorney: (If filling out this form):

DATE

B. AUTHORIZED REPRESENTATIVE:

Name _____

Address: _____

Email: _____

Signature of Authorized Representative: (If filling out this form):

DATE

C. APPELLANT:

APPELLANT'S NAME (PLEASE PRINT)

SIGNATURE OF APPELLANT *DATE*