

# APPEAL OF NOTICE/ORDER TO THE HOUSING APPEALS BOARD

(Pursuant to the Los Angeles Housing Code)



## Read all instructions before proceeding.

### 1. What is the purpose of this form?

Any party wishing to appeal a notice/order issued pursuant to the Los Angeles Housing Code (Article I, Chapter XVI of the Los Angeles Municipal Code) may submit this form requesting the Housing Appeals Board review of the notice/order. You may consider calling staff at the number provided on the notice/order for questions prior to submitting this form.

**ATTENTION:** This form is **NOT** for appealing (1) a General Manager's Hearing Officer Decision issued pursuant to Division 8 of the Los Angeles Housing Code, (2) Zoning Code violation cited on the Order, or (3) Inspection fees and/or penalties.

### 2. When to file this form?

This form must be filed with the Department within 15 calendar days of service of the challenged notice or before the expiration of the compliance date specified in the challenged order, whichever occurs later.

### 3. Where to file this form?

This form will be accepted at LAHD public counter or by mail at the following addresses:

- a. LAHD CENTRAL/SUNSET OFFICE: 1910 Sunset Blvd, Ste. 300, Los Angeles, CA 90026.
- b. LAHD EAST OFFICE: 2130 East 1st St, #2600, Los Angeles, CA 90033
- c. LAHD VALLEY OFFICE: 6400 Laurel Canyon Blvd., #610, North Hollywood, CA 91606
- d. LAHD SOUTH OFFICE/Council District 8 CSC: 8475 Vermont Ave., Los Angeles, CA 90044

### 4. How to prepare this form?

- a. Read and follow all instructions provided on this page. If you are the person appealing, you are the "Appellant."
- b. Complete all parts (A-D). Read, sign and date part E.
- c. Identify all attachment/supporting documents by writing the case number on bottom right of each page.
- d. The Appellant has the burden of proving the basis of the appeal by a preponderance of the evidence.
- e. For more information on Appeals, please refer to Section 161.1004 of the Los Angeles Municipal Code.

### 5. Is there a fee required to be submitted with this form?

Yes, you must submit a non-refundable filing fee with this form. If mailing the form, attach a check or money order for exactly one hundred and fifty dollars (U.S. \$150) made payable to "City of Los Angeles-LAHD." Be sure to write the parcel number (APN) on your check. Be sure to write the parcel number (APN), case number, and statement/invoice number on your check. To pay the filing fee by credit card or cash, please visit one of the locations listed above.

### 6. What is the Appeals Process?

After the Department accepts/receives the appeal, it is forwarded to appropriate staff for compliance review. If the appeal complies with the law, it will be processed. If the appeal does not comply with the law, it will be returned. After processing your form, if a hearing is scheduled for your appeal, you will be notified about the date, time, and location of the hearing. Failure to attend the hearing without a showing of good cause may result in an automatic denial of this appeal. The Housing Appeals Board will issue a written decision within 15 calendar days of the hearing on appeal or soon thereafter. The decision of the Appeals Board is final administrative decision; however, you may appeal the decision by filing a timely action in a court of competent jurisdiction. Filing of the appeal will stay enforcement of those portions of the challenged notice/order pending the Housing Appeals Board decision. If you have any questions regarding the appeals process or would like to know the status of your appeal, kindly call the number provided on the order and request to speak with the Senior Inspector by providing the APN and/or LAHD case number.



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## PART A: PROPERTY INFORMATION

Property Address			
Assessor Parcel Number		Council District	
Owner's Name		Owner's Phone #	

## PART B: APPELLANT INFORMATION

Appellant's Name			
Appellant's Status	<input type="checkbox"/> Owner	<input type="checkbox"/> Authorized Agent/Representative	<input type="checkbox"/> Other:
Appellant's Mailing Address			
Appellant's Phone #		Appellant's Email	

## PART C: CASE INFORMATION

LAHD Case #		Date Notice/Order Issued		Compliance Date	
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## PART D: BASIS FOR APPEAL (JUSTIFICATION)

The Housing Appeals Board may only reverse or modify an action upon finding an error of law, error of fact, or abuse of discretion. Please describe specifically, how the issuance of the notice/order was in error or constituted an abuse of discretion.  Check this box if you are attaching additional sheets and/or documents/photos/permits etc.

## PART E: ACKNOWLEDGEMENT AND SIGNATURE OF APPELLANT

I have read and understood all instructions and I declare that the information stated in this form and any accompanying documents is true and correct to the best of my knowledge.

Appellant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## THIS SPACE FOR LAHD OFFICE USE ONLY

Stamp	<b>Code</b> Reviewed By: _____ Status: <input type="checkbox"/> Process <input type="checkbox"/> Return Return Reason:
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