

**DISTRICT OF COLUMBIA  
OFFICE OF ADMINISTRATIVE HEARINGS  
441 4TH ST. NW, WASHINGTON, DC 20001-2714**

**Request For Hearing**

Date \_\_\_\_\_

**This is a request for a hearing in accordance with the Nursing Home and Community Residence Facility Residents' Protections Act of 1985, (D.C. Law 6-108)**  
 **and/or the Assisted Living Residence Regulatory Act of 2000 (D.C. Law 13-127)**  
 **The resident(s) listed below challenges the involuntary**  **transfer,**  **discharge**  
**or**  **relocation by** \_\_\_\_\_ **(name of facility).**

**A copy of the notice from the facility is enclosed. It was received by the resident(s) on** \_\_\_\_\_ **(date of receipt).**

**The move is being contested based on the following:**

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**Sincerely,**

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**Resident/Representative (Print)**

**Date**

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**Resident/Representative (Signature)**

**Date**

**Enclosure**