



DIVISION OF OCCUPATIONAL AND PROFESSIONAL LICENSING

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NOTICE OF RESPONSE

Citation #:	Date of Citation:	
Name:	Phone: ()	
Address:		
City:	State:	Zip:

You must respond within 20 calendar days to your citation as outlined below.

If you fail to timely respond, the citation will become the final order of the Division and may also result in denial of future licensure or disciplinary action against a license you currently hold.

Select only one of the following:

- | | |
|--------------------------|--|
| <input type="checkbox"/> | 1. I admit committing the offense, choose not to contest the citation and hereby submit the fine imposed. |
| <input type="checkbox"/> | 2. I admit committing the offense, hereby submit the fine imposed with a written explanation of the circumstances of the offense and request that the fine be reduced. |
| <input type="checkbox"/> | 3. I admit committing the offense, but I request a hearing to explain the circumstances of the offense. <i>(On the back of this form please submit a brief written explanation of the circumstances of the offense.)</i> |
| <input type="checkbox"/> | 4. I deny committing the offense and request a hearing to contest the citation. <i>(On the back of this form please provide a written response to the alleged citation.)</i> |

I certify that I have knowingly and voluntarily made the above election of rights. I understand that if I request a hearing the Division will notify me in writing of the hearing date and that if I fail to appear at the hearing a default judgment will be entered against me.

Signature:	Date of Signature:
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