

NOTIFICATION OF OPEN RECORD AND WAIVER OF TIME

CLAIMANT/CASE NAME:		TELEPHONE: ()
AUTHORIZED REPRESENTATIVE:		TELEPHONE: ()
COUNTY:	FILING DATE:	HEARING DATE:
ADMINISTRATIVE LAW JUDGE:		TELEPHONE: ()
ALJ'S ADDRESS		

The record is held open in this matter for the _____ to

The above information shall be received by the Administrative Law Judge on or before _____.

Any rebuttal shall be received by the Administrative Law Judge on or before _____.

These deadlines may be extended only by approval of the Administrative Law Judge prior to their expiration. If no evidence or rebuttal is received prior to the deadlines, the record shall be closed and the hearing decision will be based on evidence in the existing record.

WAIVER OF TIME

I, _____, hereby waive my right to have my case disposed of by state hearing decision within 60 or 90 days from the date of my request for such hearing. This waiver is for the sole receipt of additional evidence/argument or to permit a continued hearing.

I understand that this waiver permits an extension of _____ in which the decision is to be processed. This waiver is in addition to any other time waivers which I have executed in this matter.

DATE	CLAIMANT
DATE	AUTHORIZED REPRESENTATIVE

- The county will forward to the claimant copies of all submitted information and shall so note on the information it sends to the ALJ.
- The ALJ will forward to the county any documents submitted by the claimant or AR (unless the claimants or AR notes he/she has sent a copy of the information to the county).