

Local Health Appeal and Hearing Process

This is a guide to the local health appeal and hearing process for the state of Connecticut Department of Public Health Hearing Office (“Hearing Office”). Please be advised that this information is only a guide and is not to be interpreted as legal advice from the Department of Public Health. You are strongly encouraged to consult with an attorney if you have any questions about a local health appeal.

How the Appeal Process Works:

- Your local health department issues a Notice of Violation (NOV) or order (collectively referred to hereinafter as “Order”) to you, the owner or occupant of a property.

If you receive an Order and wish to appeal it, you may appeal by calling (860-509-7566), faxing (860-707-1904), or mailing your appeal to the Commissioner of the Department of Public Health at:

Department of Public Health
Public Health Hearing Office
410 Capitol Avenue, MS#13PHO
P.O. Box 340308
Hartford, CT 06134-0308
Tel. (860) 509-7566 FAX (860) 707-1904

- The Rules of Practice regulations that govern the local health appeal and hearing process are found at sections 19a-9-1 through 29 of the Regulations of Connecticut State Agencies “Rules of Practice” link at: [Rules of Practice](#).
- **Your right to appeal is time limited. You have three business days to appeal after you receive the Order**, either by telephone or in writing. If your initial appeal is made telephonically, you must also submit a **written appeal** that must be **received** by the Hearing Office within 10 days of the telephonic appeal. See Section 19a-9-14 of the Rules of Practice regulations at the link above for more information.
- Upon timely receipt of your written appeal, a Hearing Officer will be assigned to your case and a hearing will be scheduled at the Hearing Office in Hartford at the address provided above.
- The Hearing Officer may **uphold the Order, modify it, or vacate it** based on legal analysis, record exhibits, and testimony presented at the hearing. Local Health Departments have the burden of proof (preponderance of the evidence) unless it is a permit denial case, in which case the person appealing the permit denial has this burden.
- The Hearing Officer will issue a written Proposed Memorandum of Decision (PMOD) to you and other parties. You may request oral argument or permission to file briefs after receiving the PMOD. More information is provided in the cover letter to the PMOD.
- After oral argument/filing of briefs, or if none are requested, the Hearing Officer will review the file and issue a final decision, which will be sent to all parties via certified mail.

- An appeal must contain the following information:
 - (1) the name, address, and telephone number of the person claiming to be aggrieved;
 - (2) the name of the issuing authority;
 - (3) the way in which the order adversely affects the person claiming to be aggrieved;
 - (4) the order being appealed; and
 - (5) the grounds for appeal.

- If you do not have an attorney, you may appear on your own behalf (*pro se*). If you have an attorney you would like to represent you, your attorney must submit an appearance to the Hearing Office in writing. See Section 19a-9-28 of the Rules of Practice regulations at the link provided above. If you are a legal entity, such as a limited liability company (LLC) or corporation, **only an attorney may represent you at the hearing**. If you do not choose to have an attorney represent the entity, you may only testify as a witness and may not make legal arguments, cross-examine witnesses, or otherwise engage in the practice of law.

- If you think you will need an **interpreter** during the hearing, one will be provided free of charge upon request. Please let the Hearing Office know of your request as early as possible. You may NOT use a friend, family member, or coworker to serve as your interpreter or translator during a hearing. If you need an accommodation to fully participate in a hearing, please contact the Hearing Office.

- If you resolve the matter with your local health department before hearing and wish to withdraw your appeal and cancel any scheduled hearing, you must submit the **withdrawal of your appeal in writing** to the Hearing Office.

- If you receive the Notice of Hearing and know that you cannot be at the hearing, please let the Hearing Office know **immediately** and file a **request for continuance** in writing in order to cancel the scheduled hearing and reschedule. You should first contact the local health department and any other parties to the appeal for a position regarding your continuance request, documenting such in your written request.

Appellants who wish to seek low-cost or free legal representation should visit the following websites of Connecticut-based legal services organizations for assistance:

- [Statewide Legal Services](#) or [Statewide Legal Services \(Spanish\)](#)
- [Connecticut Legal Services](#)
- [Greater Hartford Legal Aid](#)
- [New Haven Legal Assistance](#)

Appealing an Order does NOT automatically stay, stop, or postpone its enforcement.

Please note that filing an appeal does not prevent you from contacting your local health department to attempt to resolve the matter prior to the appeal being heard.