

**PLEASE PRINT CLEARLY OR TYPE**

STATE OF NORTH CAROLINA

IN THE OFFICE OF  
ADMINISTRATIVE HEARINGS

COUNTY OF (1) \_\_\_\_\_

(2) \_\_\_\_\_ )

\_\_\_\_\_  
(your name) PETITIONER, )

v. )

(3) \_\_\_\_\_ )

\_\_\_\_\_  
RESPONDENT. )

(The State agency or board about which you are complaining) )

**PETITION  
FOR A  
CONTESTED CASE HEARING**

I hereby ask for a contested case hearing as provided for by North Carolina General Statute § 150B-23 because the Respondent has:

(Briefly state facts showing how you believe you have been harmed by the State agency or board.)

(4) Amount in controversy \$ \_\_\_\_\_ (if applicable)

(If more space is needed, attach additional pages.)

(5) Because of these facts, the State agency or board has: (check at least one from each column)

\_\_\_\_\_ deprived me of property;

\_\_\_\_\_ ordered me to pay a fine or civil penalty; or

\_\_\_\_\_ otherwise substantially prejudiced my rights;

**AND**

\_\_\_\_\_ exceeded its authority or jurisdiction;

\_\_\_\_\_ acted erroneously;

\_\_\_\_\_ failed to use proper procedure;

\_\_\_\_\_ acted arbitrarily or capriciously; or

\_\_\_\_\_ failed to act as required by law or rule.

(6) Date: \_\_\_\_\_

(7) Your phone number: (     ) \_\_\_\_\_

(8) Print your full address: \_\_\_\_\_

(street address/p.o. box)

(city)

(state)

(zip)

(9) Print your name: \_\_\_\_\_

(10) Your signature: \_\_\_\_\_

**You must** mail or deliver a **COPY** of this Petition to the State agency or board named on line (3) of this form. You should contact the agency or board to determine the name of the person to be served.

**CERTIFICATE OF SERVICE**

I certify that this Petition has been served on the State agency or board named below by depositing a copy of it with the United States Postal Service with sufficient postage affixed **OR** by delivering it to the named agency or board:

(11) \_\_\_\_\_  
(name of person served)

(12) \_\_\_\_\_  
(State agency or board listed on line 3)

(13) \_\_\_\_\_  
(street address/p.o. box) (city) (state) (zip code)

(14) This the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

(15) \_\_\_\_\_  
(your signature)

When you have completed this form, you **MUST** mail or deliver the **ORIGINAL** to the Office of Administrative Hearings, 1711 New Hope Church Road, Raleigh, NC 27609.

**This box for OAH use only.**

<p>Amount Paid \$ _____</p> <p><input type="checkbox"/> Cash – receipt number _____</p> <p><input type="checkbox"/> Money Order <input type="checkbox"/> Certified Check <input type="checkbox"/> Attorney Trust Account</p> <p>Check number _____</p>	<p><input type="checkbox"/> Indigent (must complete form HOI )</p> <p><input type="checkbox"/> Mandated federal cause of action</p> <p><b>Received by:</b> _____</p>
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**INSTRUCTIONS FOR FORM H-06**  
**“PETITION FOR A CONTESTED CASE” AND “CERTIFICATE OF SERVICE”**

**FILL IN BLANKS:**

Fill in your county of residence (1), print your name on line (2), and the name of the agency or board about which you are complaining on line (3). Be sure to briefly state the facts about your case. Enter the dollar amount in controversy, if applicable on line (4). Check all of the items that apply in section (5). Enter the date on line (6), your telephone number on line (7), your address on line (8), print your name on line (9), and **sign your name on line (10)**.

**CERTIFICATE OF SERVICE:**

You must mail or deliver a copy of your completed petition to the agency or board named on line (3) and complete the “certificate of service” section on your petition, entering the name of the person to whom you mailed or delivered the petition on line (11). You should contact the agency or board to determine the name of the person to be served. Print the name of the state agency involved on line (12), the address of the agency or board on line (13), the date on line (14), and **sign your name on line (15)**.

**FILING FEE**

Filing fees can be paid by either, cash, money order, certified check or checks drawn on attorney trust accounts. The fee must be paid at the time the petition is filed. Checks should be made payable to the Office of Administrative Hearings. If your case is involving a mandated federal cause of action there is no fee. The filing fee for Certificate of Need cases is \$125.00 as well as Environmental issues concerning Clean Water Act permitting, Clean Air Act permitting, Animal Waste Management System permitting, and permitting for water use within capacity use areas and any case when the amount in controversy is \$50,000.00 or more. All other case types shall pay \$20.00.

**FILING YOUR PETITION WITH THE OFFICE OF ADMINISTRATIVE HEARINGS:**

Your contested case will commence as soon as you file your completed original petition, properly signed and appropriate fee paid, with the Office of Administrative Hearings. Below is the mailing and physical address:

**Office of Administrative Hearings**  
**1711 New Hope Church Road**  
**Raleigh, NC 27609**

If you mail this form, the case commences when it is **received and filed** in this office.

You may file your petition by fax during normal business hours by faxing the petition to the Clerk's Office at (984) 236-1871.

You may file your petition by electronic mail by an attached file either in PDF format or a document that is compatible with or convertible to the most recent version of Word for Windows by sending the electronic transmission to [oah.clerks@oah.nc.gov](mailto:oah.clerks@oah.nc.gov). Electronic mail without attached file shall not constitute a valid filing.