



**Prince George's County**  
Department of Permitting, Inspections  
and Enforcement  
Administrative Hearing Unit  
9400 Peppercorn Place, Suite 500  
Largo, Maryland 20774  
E-mail: AHU@co.pg.md.us



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## **WAIVER OF RIGHT FOR AN IN-PERSON HEARING**

I have been advised of my right to appear in person before the Administrative Hearing Unit. I understand that I have a right to be represented by counsel. I understand that if I do not appear before the Administrative Hearing Unit, I still have the right to present a written summary of my case, or to enter written statements about the facts and law material to my case in the record. Accordingly, I do not want to appear in person and elect to have my case decided on the written evidence provided.

Mail and online adjudication is considered a hearing. You will be notified of the decision in writing by mail at your address of record. I understand that my personal appearance before the Administrative Hearing Unit would provide me with the opportunity to present written evidence, my testimony, and the testimony of other witnesses. I understand that this opportunity to be seen and heard could be helpful to the Hearing Officer in making a decision. Providing evidence is voluntary. However, failing to provide us with all or part of the requested information and evidence may affect the decision of your case.

You must submit this request to waive an in-person hearing in writing within thirty (30) days of the receipt of your citation. Send a copy or upload your citation along with your written explanation and supporting documentation. If you deny the infraction, you must include information or evidence (i.e., documentation, pictures, etc.) to support your position. Your written statement will take the place of an in-person hearing.

Send the adjudication request to the following email:

**AHU@co.pg.md.us**

If you submit a request for a waiver of an in-person hearing but later decide to appear in person, you have ten (10) days to submit a written request for an in-person hearing before the Administrative Hearing Unit.



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## WAIVER OF RIGHT FOR AN IN-PERSON HEARING

*Please PRINT or TYPE all information.*

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
 \_\_\_\_\_

E-mail: \_\_\_\_\_

Phone: \_\_\_\_\_

Citation No.(s):

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

*Send to the following e-mail:*

**AHU@co.pg.md.us**

### Respondent's Statement

**By signing this form, I consent to waiving my right to an in-person hearing and elect to have my case decided on the written evidence provided.**

\_\_\_\_\_  
 Respondent's Signature

\_\_\_\_\_  
 Date Signed