



City of Albuquerque
Office of Administrative Hearings

Notice of Appeal and Request for Hearings

You will be notified by certified mail, of the date, time and location of the hearing.

Date_____

Print Name_____

Mailing Address (#, Street Name, Apt#)_____

City, State and Zip Code_____

Phone #_____

Date of Action_____

Reason for Appeal:

Please email this form to summonsandappeals@cabq.gov. Or mail your request to the City Clerk's Office, PO Box 1293, Albuquerque, NM 87103. If your appeal requires a \$50.00 filing fee please submit your appeal and payment by mail. If you have any questions or want to confirm receipt of your appeal please call the City Clerk's Office at 505-924-3650.