

**REQUEST TO PARTICIPATE IN THE
HEARING BY TELEPHONE OR IN PERSON**

PAAB Docket No. _____

Appellant,

vs.

Appellee.

Scheduled Hearing Date/Time: _____

I request to participate in the hearing scheduled in the above-captioned appeal:

BY TELEPHONE, by calling **1-866-685-1580** and entering **0009990988#** when prompted on the date/time of the hearing.

IN PERSON, by appearing at the Hoover State Office Building, 4th Floor, 1305 E. Walnut, Des Moines, Iowa on the date/time of the hearing.

* Unless a resistance is filed, PAAB will automatically grant the request and PAAB will not issue a separate order granting it. PAAB will expect the filer to participate in the hearing as indicated above.

Signature: _____

Date: _____

Phone Number: _____

Email: _____

This form must be filed with PAAB and sent to the opposing party.

Copies to: _____