Attachment B

REQUEST FOR APPEAL TO EXECUTIVE DIRECTOR

This completed Request Form must be submitted to HAGC's Grievance Coordinator no later than fourteen (14) calendar days after an informal review or the date of the Hearing Officer's informal hearing decision. Late requests will not be processed unless the requestor demonstrates the delay was due to extraordinary circumstances beyond the requestor's control (proof of extraordinary circumstances shall be attached to this Request Form). Failure to submit a timely request is a waiver of the right to appeal. The HAGC Executive Director, or designee, will review the Hearing Officers decision to ensure that the decision was compliant with HUD regulations and HAGC's Administrative Plan and policies. On appeal, the Executive Director, or designee, shall only review the recording of, and the documents and evidence presented during, the informal hearing. New documents and evidence shall not be considered on appeal. See HAGC's Grievance Policy for more information.

Head of Ho	usehold:		
Last 4 digits	s of Social Security #:	Email:	
Address:			
Phone No: _			
Are you a:	□ Program Participant	□ Program Applicant	□ HAGC Resident
Program:			
Date of info	ormal review or informal hear	ring:	
This statem HUD regula	ent shall describe why HAC	GC's adverse action or dec strative Plan and policies,	he Hearing Officer's decision. ision was not compliant with based upon the evidence and itional pages as necessary)

The Housing Authority of Gloucester Grievance Policy			
Print Name	Signature	Date	
Tillit Name	Signature	Date	