

## Notice of Appeal

This form is used to file an appeal of an order, notice, decision, determination, or ruling by the Allegheny County Health Department. Please complete this form (use additional pages as necessary). If more than one person or entity is filing this appeal, please attach a separate form for each additional appellant. A copy of the order, notice, decision, determination, or ruling must be attached to the Notice of Appeal.

•	Construction Co., Inc.	uling must be	allacii	ied to the	HOUGE	
	dress_8051 Aber Road					
City Verona		State _PA	_Zip _	15147	_ Email	heddycsi@yahoo.com
Phone 412-						
If you are re	epresented by an attorn	ey, please pr	ovide o	ontact ir	formatio	n for your attorney:
Name_Fran	nklin L. Robinson, Jr., Esquire	•				
Mailing Add	dress_5907 Penn Avenue, S	Suite 200				
City Pittsbur			_Zip _ <sup>1</sup>	5206	_ Email	flrquestions@aol.com
	-363-6685					
the Hearing	g Officer to grant. (The or re, you may be barred from	bjections may l m raising it late	pe factu r in you	ıal or lega ır appeal.	l and mus Use addi	describing the relief you want st be specific. If you fail to state an itional pages if necessary.) and penalties imposed because they a
						adjusted lower because any violations
						ement barriers were removed to allow
						Work at Alder Street was properly
abated with	plastic containment areas an	d air clearance b	y a third	I party. Th	e neighboi	rhood children would enter the residenc
and tear down	n the plastic containment are	as without perm	ission of	the building	ng that was	s scheduled for demolition. In both
job sites, ther	re was no risk or exposure to	students or any	one ente	ering the p	remises. E	Based on the unintentional violations
a reduction in	n the fines and penalties impo	osed on Decemb	er 15, 2	021 should	d be drastic	cally reduced to a reasonable amount.
By filing the that the interest Signature	his Notice of Appeal w formation submitted i	ith the Allega s true and co	heny ( prrect t	to the be	lealth Dest of my	epartment, I hereby certify information and belief.
	a should be submitted in	n norman ar hi	mailt	·0.1		necell/EU

Appeals should be submitted in person or by mail to:

**Allegheny County Health Department Attention: Hearing Officer** 542 4th Avenue Pittsburgh, PA 15219

RECEIVED

JAN 1 4 2022

LEGAL SECTION Allegheny County artment