

## State of New Jersey OFFICE OF ADMINISTRATIVE LAW

		OAL DKT. NO.:
Petiti	ioner,	
ν.		AGENCY DKT. NO.: NOTICE OF APPEARANCE/APPLICATION LEGAL SERVICE REPRESENTATIVE
TO: ALJ		
I,		, hereby apply to represent
		in the above-captioned case. Pursuant to
<u>N.J.A.C</u> . 1:1	-5.4(b), I submit the following	information in support of my application.
1.	l am a	
	legal assistant	
	paralegal	
employed by	/	
2.	My Office Address:	
	Office Phone Number:	
	Office E-Mail Address:	
	Office Fax Number:	
3.	My supervising attorney is	
Her/his phor	ne number and address are: _	

- 4. I am not a suspended or disbarred attorney.
- 5. I am not receiving a fee for any appearance before the Office of Administrative Law.

I agree that if permitted to appear in this matter I am subject to the Uniform Administrative Procedure Rules and I must adhere to appropriate standards of conduct as set forth in *N.J.A.C.* 1:1-5.5(g). Further, I understand that it is my responsibility to give my client notice of any scheduled proceeding.

I have served a copy of this application on all other parties to the case.

DATE

## SIGNATURE

As the Legal Services attorney charged with supervising the above-named paralegal or legal assistant, I hereby authorize this application. I hereby certify that the above information is true and accurate.

DATE

LEGAL SERVICES ATTORNEY