



CITY OF EASTPOINTE

MUNICIPAL OFFICES
23200 GRATIOT AVENUE
EASTPOINTE, MI 48021

APPEALS TO HEARING OFFICER

RULES OF PROCEDURES

1. Each party who participates in the appeal hearing shall file a written summary of their respective positions which shall include a statement of facts, summary of law, and proposed standard of review.
2. The summaries shall be filed at least 7 days before the hearing.
3. The summary shall not exceed 25 pages, double spaced, exclusive of exhibits.
4. At the hearing, each party who participates shall have a maximum of one hour for an oral presentation. This time-frame may be extended by agreement of the parties.
5. The City of Eastpointe shall provide notice of the hearing to the parties at least 21 days before the date of the hearing. The hearing may be adjourned upon agreement of the parties.
6. The formal rules of evidence in civil and criminal proceedings shall not apply at the hearing.
7. At the hearing, the hearing officer may admit any evidence, including witness testimony, relevant to the determination of the matter.
8. A record of the hearing shall be made by any means, including electronic recording, so long as a reasonably accurate and complete written transcription of the proceedings can be made.
9. The hearing may be conducted via zoom or in person, subject to any emergency action taken by the City Council.
10. Each party who participates in the hearing shall submit proposed findings of fact and conclusions of law within 21 days after the hearing.
11. The hearing officer shall issue a written notice of the decision and recommendation and provide each party who participated in the hearing with a copy of same within 45 days following the hearing.

The Applicant acknowledges the Rules of Procedures for Appeals to Hearing Officer.

Applicant Signature

Date

Applicant Printed Name

Subscribed and sworn to by _____ before me on _____.
(Applicant Name) (Date)

Notary Public Signature

Notary Public Printed Name

State of _____, County of _____. Acting in the County of _____, _____.
(County) (State)

My commission expires: _____.