BEFORE THE HEARING EXAMINER CITY OF SEATTLE

In the Matter of the Appeal of	Hearing Examiner File:
[APPELLANT'S NAME]	()
from a decision issued by the Director, Department of	MOTION FOR CONTINUANCE OF HEARING
	Appellant/Respondent], [name], requests that the l, be continued to a later date. The reason for the low good cause for the continuance].
[If the party requesting the continuance has che agreement to the continuance and/or about othe include that information here.]	1
Dated this day of	·
	[Name] [Appellant's/Respondent's] Representative