

NOTICE TO VACATE HOTEL/MOTEL WHERE YOU ARE STAYING

This purpose of this form is to help ESD determine if clients will remain in housing under the transition housing benefit (Act 81).

Instruction to Motels:

If you are asking a guest to leave your motel, you must:

- Complete this form in its entirety. Leave no field blank.
- Provide a copy of your completed form to the guest.
- Send by email to AHS.DCFESDGAHManagement@vermont.gov as soon as possible.

Dear _____:
(first and last name of guest)

You are being asked to leave the motel for:

- ☐ Violent criminal behavior
- ☐ Non-violent criminal behavior that jeopardizes the health or safety of other guests or motel staff (for example: the sale, distribution, or manufacturing of illegal substances);
- ☐ Repeated non-violent criminal behavior (for example: theft or disorderly conduct); or
- ☐ Other violation of hotel rules or policy (for example: arguing with hotel staff, unauthorized guests, smoking in nonsmoking areas)—explain below.

Explain what happened:

NOTE TO GUEST—if you were asked to leave the hotel for you may be eligible to be rehoused. Please contact Economic Services at 1-800-775-0506 immediately.

Need help finding treatment for drug or alcohol addiction? Find resources online at <https://www.healthvermont.gov/alcohol-drug-abuse/how-get-help/find-treatment> or call 2-1-1.

RIGHT TO A FAIR HEARING:

If you disagree with this decision, you may:

- Ask the Human Services Board for a fair hearing. *You'll get to tell your side of the story. And you can have a person you trust help you.*
- Ask to be housed in another hotel/motel while waiting for the fair hearing decision.
- Call 1-800-889-2047 to see if you qualify for free help from Vermont Legal Aid.

To request a fair hearing, call ESD at 1-800-479-6151. If you ask for a fair hearing, one will be scheduled within 10 days. Before the hearing, ESD will produce for you or your representative a copy of the evidence we will be presenting.

RIGHTS OF PEOPLE WITH DISABILITIES:

Please let ESD know if you have a physical, mental, or learning disability that:

- Makes it hard for you to follow the rules at the motel/hotel, or
- Makes it hard for you to participate at a fair hearing.

You may be entitled to ask for a reasonable accommodation. This could include changing how the program is administered to give you an equal opportunity to participate.

Name of hotel:

Date(s) at hotel:

Name of authorized guest(s):

Name of person completing this form:

Signature:

Date: