[Dates, names, and other information should be changed to reflect your agency’s submission. Replace “Agency” with “Department/Board/Bureau/Commission” as applicable.]

# Notice of Submission of Rules Proposed for Adoption Without a Public Hearing to the Office of Administrative Hearings

**Minnesota [Agency Name]**

**Amendments to Rules Relating to [Topic]; Minnesota Rules, [citation]; Revisor’s ID Number [number]; OAH Docket No. [number]**

**Date:** [date] [Make sure this date is the same as the date in the second paragraph, below (or earlier).]
**To:** All Interested Persons

In accordance with Minnesota Statutes, section 14.388, subdivision 2, this Notice is being sent to all persons who have registered their name with the [Department/Agency/Board] under Minnesota Statutes, section 14.14, subdivision 1a. This Notice is also posted on the website of the [Agency Name].

PLEASE TAKE NOTICE that the above‑cited rules proposed for adoption will be submitted to the Office of Administrative Hearings on the date of this Notice, [date]. A copy of the rule modification is attached to this Notice.

All interested persons have five business days after the date of this Notice to submit comments to the [Office of Administrative Hearings Rulemaking eComments website (https://mn.gov/oah/forms-and-filing/ecomments/)](https://mn.gov/oah/forms-and-filing/ecomments/)***.*** If using the eComments website is not possible, you may submit post-hearing comments in person or via United States mail addressed to Judge [ALJ’s last name] at 600 North Robert Street, P.O. Box 64620, Saint Paul, Minnesota 55164-0620.

[City and describe authorizing law] By Laws of Minnesota YEAR, Special Session, chapter #, article #, section #, the Minnesota Legislature requires the commissioner of [agency name] to adopt or amend rules relating to [topic]. [Include additional paragraphs for additional applicable law]

The [Department/Agency/Board] is using the good cause exemption process under Minnesota Statutes, section 14.388, subd. 1, clause (3), to make the specific change stated in the laws cited above without additional interpretation.

The agency contact person is [name, agency, address, phone, and email]. You should direct questions or comments about the rules to [name]. For special accommodation, you may contact agency contact person. Questions concerning the rules should be directed to the agency contact person.

[Name]

[Title]