**Minnesota Department of [Name]**

**NOTICE OF CANCELLATION OF HEARING TO PERSONS WHO REQUESTED A HEARING**

**Proposed [Amendment to] [Repeal of] Rules Governing [Topic], Minnesota Rules, [citation]**

**To persons who requested a hearing.** The Department is sending this Notice to all persons who requested a hearing.

**The hearing is canceled.** In the [month] [date], [year], State Register, on pages [page] to [page], the Department of [Name] published a Notice of Intent to Adopt Rules relating to [topic]. The Notice stated that a hearing would be held on the proposed rules if 25 or more persons submitted written requests for a hearing. In response, the Department received [#] requests for a hearing. Consequently, the Department is canceling the hearing. The Department will adopt the rules without a hearing and then submit the rules and other required documents to the Chief Administrative Law Judge for review by the Office of Administrative Hearings. The Department will consider all written comments when it adopts the rules.

**Agency Contact Person.** The agency contact person is: [name] at [agency, address, and phone]. Questions or comments concerning the cancellation of the hearing or about the rule adoption process should be directed to the agency contact person.

Date [Name]

[Title]

- [This may be signed by the Commissioner, the Division Director, or the Rule Writer.]

Revisor’s ID Number [number]