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Sequence Number: 06-11-16  
 Rule ID(s): N/A  
 File Date: 6/14/16  
 Effective Date: 6/14/16

## Filing Form for Stay of Effective Date on Rules, Withdrawal of Stay, and Withdrawal of Rules

<b>Agency/Board/Commission:</b>	Tennessee Board of Communications Disorders and Sciences Council for Licensing Hearing Instrument Specialists
<b>Division:</b>	
<b>Contact Person:</b>	Hannah Lanford, Assistant General Counsel
<b>Address:</b>	665 Mainstream Drive, Nashville, Tennessee
<b>Zip:</b>	37243
<b>Phone:</b>	(615) 741-1611
<b>Email:</b>	Hannah.Lanford@tn.gov

**Type of Action on Rule:**

**Stay of Effective Date of Rules**

Rule Filing Date: (mm/dd/yy)  
 Rule Original Effective Date: (mm/dd/yy)  
 Length of Stay (not to exceed 75 days): \_\_\_\_\_  
 New Effective Date of Rule Filing: (mm/dd/yy)

**Notice of Withdrawal of Stay**

Stay Filing Date: (mm/dd/yy)  
 Stay Effective Date: (mm/dd/yy)  
 New Effective Date of Rule Filing: (mm/dd/yy)

**Notice of Withdrawal of Rules**

Rule Filing Date: 04/25/16 (mm/dd/yy)  
 Rule Effective Date: 07/24/16 (mm/dd/yy)

**Rule(s)** (ALL chapters and rules contained in filing must be listed here. If needed, copy and paste additional tables to accommodate multiple chapters. Please enter only **ONE** Rule Number/RuleTitle per row)

Chapter Number	Chapter Title
1370-02	General Rules Governing Hearing Instrument Specialists
Rule Number	Rule Title
1370-02-.06	Fees

Date: 6/14/16

Signature: *[Handwritten Signature]*

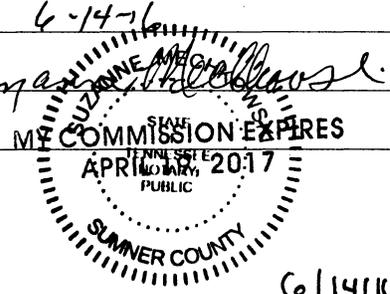
Name of Officer: Hannah Lanford  
Assistant General Counsel

Title of Officer: Department of Health

Subscribed and sworn to before me on: 6-14-16

Notary Public Signature: *[Handwritten Signature]*

My commission expires on: \_\_\_\_\_



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Filed with the Department of State on: 6/14/16

*[Handwritten Signature]*

Tre Hargett  
Secretary of State

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