

APPLICATION FOR LEAVE TO APPEAL/ NOTICE OF APPEAL

Please read the information notes and the guidance on how to apply for leave to appeal, or to appeal, before completing this form. Please use black ink. Please complete the form in CAPITALS.

Section A – PERSON MAKING THE APPLICATION OR APPEAL

First name

Address

Surname

Title (e.g. Mr/ Mrs/ Ms)

Postcode

Email address

Contact telephone number

Important – Please inform us if your contact details change at a later date

Are you willing to accept service of documents by e-mail?

Yes

No

Section B - APPOINTEES

Have you been appointed by the Department for Communities to act on behalf of someone else, because that person is unable to act for themselves, or is a child claiming disability living allowance, or because that person is now deceased?

Yes

No

If your answer is **Yes**, what is that person's name?

Section C - REPRESENTATIVES

Do you wish to appoint a representative to act on your behalf in the proceedings before the Commissioner?

Yes

No

If your answer is **Yes**, please give that person's details below:

Name of representative

Representative's address

Representative's e-mail address

Representative's telephone Number

Postcode

Is your representative willing to accept service of documents by e-mail?

Yes

No

Section D – ABOUT THE TRIBUNAL DECISION

What was the date of the Tribunal decision that you want to appeal against?

What was the Tribunal reference number?

Have you been given a copy of the Tribunal decision notice?

Yes **No**

Have you obtained a statement of reasons for the Tribunal decision?

Yes **No**

Have you applied for leave to appeal to the Commissioner from the legally qualified member of the Tribunal and received a decision in response?

Yes **No**

An application which does not enclose a copy of each of the above documents is irregular. However, a Commissioner may still admit such an application, even if you cannot provide all of the documents required.

Section E - LATENESS

Has more than one month passed since you were sent a notice that you had been granted leave to appeal, or since your application for leave to appeal was refused or rejected by the legally qualified member of the Tribunal?

Yes **No**

If you ticked **Yes**, your application to the Commissioner is late.

Please say below why you are late in submitting this form to the Commissioner and why you think your case should proceed even though your application is late

Section F – WHY YOU THINK THE TRIBUNAL’S DECISION WAS WRONG IN LAW

Remember that your application/appeal must set out your reasons for believing that the Tribunal’s decision was wrong in law. (See the enclosed notes about what amounts to an error of law)

Please set out as fully as possible what error of law you think the Tribunal may have made.

Please use extra sheets of paper if there is not enough room for you to say everything.

Section G – TREATING THE APPLICATION AS AN APPEAL

Did the legally qualified member of the Tribunal grant you leave to appeal?

Yes

No

If **No**, but the Commissioner grants you leave to appeal, do you consent to the Commissioner treating and determining your application as if it was an appeal, relying on the grounds you have submitted at Section F?

Yes

No

If you are unsure what to say, you may leave this section blank

Section H – ORAL HEARING

Do you (or your representative) request an oral hearing before a Commissioner?

Yes

No

If **Yes**, please give your reasons why here:

Section I – YOUR SIGNATURE

I apply for leave to appeal against the decision of the Tribunal

OR

I appeal against the decision of the Tribunal

AND

I authorise the named representative (if any) to act on my behalf in all proceedings before the Commissioner.

Signature

Date

Now send or deliver this form, together with:

- A copy of the tribunal's decision notice
- A copy of the written statement of reasons for the tribunal's decision
- A copy of the notice informing you that the legally qualified member of the tribunal has granted or refused you leave to appeal, or has rejected your application

To the address below:

**Office of the Social Security Commissioner,
2nd Floor,
Royal Courts of Justice,
Chichester Street,
Belfast BT1 3JF**