

Application for Appeal*

ACAT File Number:
(ACAT use only)

AA

* For use when appealing an original decision under section 79 of the ACT Civil and Administrative Tribunal Act 2008 only

APPLICANT DETAILS

(For multiple applicants attach details on a separate page)

Name:

Postal Address:

Preferred Phone Number:

Alternate Phone Number:

Email:

APPLICANT REPRESENTATIVE DETAILS

(Any representative who is not a lawyer should file an *Authority to Act for a Corporation* or *Power of Attorney*)

Name:

Postal Address:

Phone Number:

Email:

RESPONDENT DETAILS

(For multiple respondents, attach details on a separate page)

Name:

Postal Address:

Preferred Phone Number:

Alternate Phone Number:

Email:

DETAILS OF THE ORIGINAL ACAT DECISION

Original ACAT file number:

Date decision made:

Date you received decision:

REASONS FOR APPEAL

(Attach page if insufficient space. You may attach additional information/documents/statements)

Using the following headings, please state:

1. The questions of law or fact involved, that is the errors of fact or law you say have been made
2. Any additional evidence you wish to introduce
3. Reasons why the appeal should proceed

WHAT ORDERS ARE YOU SEEKING (for example, the original orders be set aside and the following orders be substituted):

INTERIM OR EMERGENCY ORDERS SOUGHT (for example, to stay the appealed decision):

Applicant to complete

Signature of applicant or applicant's representative:

Name of applicant or applicant's representative:

(Any representative who is not a lawyer must be properly authorised by an *Authority to Act for a Corporation* or *Power of Attorney*)

Date:

Checklist for Applicants

Lodgement of an Application for Appeal

- Application for Appeal* form (available at www.acat.act.gov.au) has been correctly filled out including:
 - Applicant's name and full contact details, including email address are completed
 - A copy of the original ACAT decision is attached
 - This form is signed and dated by the applicant or the applicant's authorised representative.
- If applicable, *Power of Attorney* or *Authority to Act for a Corporation* form has been completed (available at www.acat.act.gov.au) to be filed with the application.
- Correct lodgement fee is ready to be provided with application. The ACAT accepts cash, bank cheque and credit card payments over the counter, and bank cheque or credit card payments via post. Credit card payments are accepted via post using the Credit Card Payment Authorisation form. Information on fees payable is available at www.acat.act.gov.au.
- Complete *Request About Payment of Fees* form if you believe that the payment of fees will cause hardship and you wish to apply for a waiver of fees. Information on fee waivers is available at www.acat.act.gov.au. You are eligible for an exemption from paying fees if you are the holder of a Commonwealth-issued health care card, low income health care card or pensioner concession card.