

# Appeal

**Remember - you can always ask for an explanation and/or reconsideration of our decision before your appeal goes to a tribunal**

Complete this form and take or send it to the address on the last page

## About you

Title

Mr/Mrs/Miss/Ms

Your surname

All other names

Your date of birth

National Insurance (NI) number

Get this from your NI number card, payslips, tax papers or letters from social security.

Your address

Postcode

Daytime telephone number

Code Number

Have you arranged for someone to help you with your appeal?

No

Yes  Please state their name and address

Their full name

Their address

Postcode

Their daytime telephone number

Code Number

Sign this box to authorise this person to act for you

## About the decision

Name of benefit or benefits  
ie housing benefit/council tax benefit

Date at the top of the letter about the decision

## About your appeal

- Use the space on the other side of this form to say why you do not agree with this decision
- You must say **why** you think the decision is wrong. It is not enough to say "I do not agree with the decision" or "The money is not enough"
- The reasons you give should be like these examples
  - "My rent was £75 per week but you have stated it was £35 per week"
  - "I move into the property on 1st November not 1st December"

- "You have used the wrong wages to work out my benefit. I received £250 only during the Christmas week"
- If you are appealing against more than one decision, you must say why you do not agree with each one.
- If you are appealing more than one month after the decision was made, you must say why your appeal has been delayed.

## Your signature

Your signature

Date

**If someone has been officially appointed to act for you or someone has the authority to act for you, they should sign here**

\_\_\_\_\_

## What to do now

- Make sure you have said on this form **exactly** why you do not agree with the decision.
- Take or send the form to us.
- It will help if you write **Appeal** on the front of the envelope.
- Remember, your appeal must reach our office within **one month** of the date at the top of the letter telling you about the decision.

# Your Appeal

- Use this space to say why you do not agree with this decision
- You must say **why** you think the decision is wrong. Use BLOCK CAPITALS.

Large empty rectangular area for writing an appeal.

The Benefit Appeals Officer  
Salford City Council  
Customer and Support Services  
Unity House  
Charley Road  
Swinton  
M27 2AW

For office use

Date appeal form received from customer

Date appeal form received from customer

Continue overleaf

Your appeal continued .....

- If you need more space, use another sheet of paper. Remember to put your name, address and National Insurance number on any extra sheets of paper you use.
- Make sure you have filled in all parts of this form and signed it.
- Take or send this form to:

**The Benefit Appeals Officer  
Salford City Council  
Customer and Support Services  
Unity House  
Chorley Road  
Swinton  
M27 5AW**

**For office use**

date appeal form issued to customer

date appeal form received from customer

..... (Signature) ..... (Date)