

LOCAL GOVERNMENT ACT 2000

The Local Authorities (Code of Conduct) (Local Determination) Regulations 2003

APPLICATION FOR PERMISSION TO APPEAL

1	Your Name and Address	
2	Local Authority or other body of which you are a Member	
3	Date of Standards Committee Decision against which you seek to appeal <i>(The decision itself should be attached to this form)</i>	
4	Do you dispute that you failed to comply with the provisions of the Code of Conduct as determined by the Standards Committee	YES / NO <i>(if yes, please give your reasons)</i>

5	Do you wish to appeal against the sanction imposed by the Standards Committee?	YES / NO <i>(if yes please give your reasons)</i>
6	If permission to appeal is granted do you agree to the Appeal being determined by way of written representations?	YES / NO

Your signature

Print Name:.....

Date.....

President's Decision:

Permission	Granted / Denied
Reason if permission refused:	

Signed

Date