

**FORM B**

**NOTICE OF INTERNAL APPEAL**

(Section 75 of the Promotion of Access to Information Act, 2000 (Act No. 2 of 2000))

**[Regulation 6]**

**STATE YOUR REFERENCE NUMBER:** \_\_\_\_\_

*NOTE: A person who lodges an internal appeal may have to pay an appeal fee. If an appeal fee is payable, the decision of the internal appeal may be deferred until the fee . . .*

**A. Particulars of public body**

The Information Officer/Deputy Information Officer:

\_\_\_\_\_  
\_\_\_\_\_

**B. Particulars of requester/third party who lodges the internal appeal**

*(a) The particulars of the person who is lodging the internal appeal, must be completed below.  
(b) Proof of the capacity in which appeal is lodged, if applicable, must be attached.  
(c) If the appellant is a third person and not the person who originally requested the information, the particulars of the requester must be stated at C below.*

Full names and surname: \_\_\_\_\_

Identity number: \_\_\_\_\_

Postal address: \_\_\_\_\_

\_\_\_\_\_ Fax number: \_\_\_\_\_

Telephone number: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Capacity in which an internal appeal on behalf of another person is lodged: \_\_\_\_\_

**C. Particulars of requester**

*This section must be completed ONLY if a third party (other than the requester) is lodging the internal appeal.*

Full names and surname: \_\_\_\_\_

Identity number: \_\_\_\_\_

**D. The decision against which the internal appeal is lodged**

*Mark the decision against which the internal appeal is lodged with an "X" in the appropriate box:*

	Refusal of request for access.
	Decision regarding fees determined in terms of section 22 of the Act.
	Decision regarding the extension of the period within which request must be dealt with in terms of section 26(1) of the Act.
	Decision in terms of section 29(3) of the Act to refuse access in the form as requested by the requester.
	Decision to grant request for access.

**E. Grounds for appeal**

*If the provided space is inadequate please continue on a separate folio and attach it to this form. **You must sign all the additional folios.***

State the grounds upon which the internal appeal is based: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

State any other information that may be relevant in considering the appeal: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

**F. Notice of decision on appeal**

*You will be notified in writing of the decision on your internal appeal. If you wish to be informed thereof in another manner, please specify the manner and provide the necessary particulars to enable compliance with your request.*

State the manner: \_\_\_\_\_

Particulars of manner: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

Signed at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF APPELLANT

**FOR DEPARTMENTAL**

<p><b>FOR DEPARTMENTAL USE:</b></p> <p style="text-align: center;"><b>OFFICIAL RECORD OF INTERNAL APPEAL:</b></p> <p>Appeal received on _____ (date) by _____          _____ (state rank, name and surname of information officer/deputy information officer).</p> <p>Appeal accompanied by the reasons for the information officer/deputy information officer's decision and, where applicable, the particulars of any third party to whom or which the records, submitted by information officer/deputy information officer on _____ (date) to the relevant authority.</p> <p><b>OUTCOME OF APPEAL:</b>          DECISION OF INFORMATION OFFICER/DEPUTY INFORMATION OFFICER          CONFIRMED/SUBSTITUTED BY NEW DECISION          NEW DECISION:</p> <p>_____          _____          _____          _____          _____          _____</p> <p style="text-align: center;">             _____              DATE             <span style="margin-left: 200px;">_____</span>              RELEVANT AUTHORITY         </p> <p>DATE RECEIVED BY THE INFORMATION OFFICER/DEPUTY INFORMATION OFFICER FROM THE RELEVANT AUTHORITY: _____          _____</p>	
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