

ADVERTISEMENT APPEAL FORM

For appeals relating to applications for CONSENT TO DISPLAY AN ADVERTISEMENT

Please note that your appeal <u>must</u> reach the Commission within the time period specified in the relevant legislation.

Please complete in BLOCK CAPITALS and use a separate form for each appeal

A. APPELLANT'S CONTACT DETAILS			
Name			
Address			
Postcode			
Daytime phone number			
E-mail address*			
B. CONTACT DETAILS	TACT DETAILS FOR THE AGENT (if any)		
Name			
Address			
Postcode			
Daytime phone number			
E-mail address*			
Agent Reference			

^{*}If you have an e-mail address, we will use it to correspond with you.

C.	PLANNING AUTHORITY TO WHI	CH THE APPLICATION WAS MADE		
Name	e of planning authority			
Locat	ation of planning office			
Applic	ication reference number			
D.	KEY DATES			
Date	of application to planning authority			
Date	e of decision notice (if any)			
Date decision notice received (if known)				
E.	NATURE OF APPEAL			
Please tick ONE box only to indicate what you are appealing against:-				
Refus	sal of the application			
Failure to give a decision on the application				
Condi	ditional grant of the application			
If you are appealing against the conditional grant of an application, please identify the number(s) of the condition(s) you wish to challenge				
F.	PROPOSAL TO WHICH THE APP	PEAL RELATES		
Sumn	mary description			

G. LAND TO WHICH THE APPEAL RELATES Address or location of site

H. CHOICE OF APPEAL PROCEDURE Please indicate how you would like your appeal dealt with by ticking ONE of the boxes below. We will also ask the authority for its views before deciding which procedure to use. Written representations Written representations with accompanied site visit Informal hearing* Formal hearing* *For those who wish to proceed with a hearing, please tick ONE box to indicate the type of hearing you would prefer. In Person Hybrid Remote

Detailed information about each of these procedures is given in the Commission's publication "Procedures for Planning and Water Appeals", which is available on our website www.pacni.gov.uk.

I. SUPPORTING DOCUMENTS

Please tick the boxes appeal:-	s below to indicate which of the following you ar	e copying to us with your
Form(s)		
Plan(s)		
Report(s)		
Correspondence		
Notice(s)		
Other Document(s)		
J. DECLARATION I appeal on the basis	ON of the information set out above.	
Signature _		
On behalf of _		
Date _		

Data Protection

The information provided by you in this form will be stored and processed by the Planning Appeals Commission in accordance with the principles of the Data Protection Act 2018 and the UK General Data Protection Regulations (UK GDPR) 2021. Our lawful basis for processing such information is provided for under Article 6 1(e) of the UK GDPR. Further information on our Data Protection Policy and our Privacy Notice is available on our website www.pacni.gov.uk.

When we receive your form, we will:-

- 1. Check that the appeal is valid and if so, acknowledge receipt.
- 2. Tell the planning authority we have received your appeal.
- 3. Let you and the authority know the procedure for your appeal.
- 4. Let you know the timetable for sending your written evidence.
- 5. Let you know the arrangements for any accompanied site visit or hearing.

At the end of the process the Commission will give you a written decision on your appeal which will include a statement of the reasons for the decision.