

**ANNEXURE C**

**PRESCRIBED FORM FOR INTERNAL APPEAL**

**FORM B**

**NOTICE OF INTERNAL APPEAL**

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

Forms can also be accessed from THE DEPARTMENT's website:  
[www.TheDepartment.gov.za/documents/other/PIA](http://www.TheDepartment.gov.za/documents/other/PIA)

**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 a internal appeal may be deferred until the fee is paid.

**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: .....

.....

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:	
<input type="checkbox"/>	Refusal of request for access.
<input type="checkbox"/>	Decision regarding fees determined in terms of Section 22 of PAIA.
<input type="checkbox"/>	Decision regarding the extension of the period within which request must be dealt with in terms of Section 26(1) of PAIA.
<input type="checkbox"/>	Decision in terms of Section 29(3) of PAIA to refuse access in the form as requested by the requester.
<input type="checkbox"/>	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 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.....

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

FOR DEPARTMENTAL USE:

OFFICIAL RECORD OF INTERNAL APPEAL:

.....

Appeal received on: ..... (date) by: .....

(state rank, name and surname of information officer/deputy information officer). 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.

OUTCOME OF APPEAL: .....

DECISION OF INFORMATION OFFICER/DEPUTY INFORMATION OFFICER CONFIRMED/  
SUBSTITUTED BY NEW DECISION:

.....

NEW DECISION: .....

DATE: .....

RELEVANT AUTHORITY: .....

DATE RECEIVED BY THE INFORMATION OFFICER / DEPUTY INFORMATION OFFICER FROM  
THE RELEVANT AUTHORITY:

.....