

FORM FOR APPEAL  
(See rule 55)

FOR OFFICIAL USE

Date: .....

- 1. Name of the Appellant
- 2. Address:
- 3. Name and address of the authority, whose decision or order is brought up in appeal
- 4. Brief of the decision against which Appeal is made
- 5. Reason as to why the decision needs review
  - 1.
  - 2.
  - 3.
- 6. Any other remarks

Signature of the Appellant : .....

Name in Block Letters : .....

Designation : .....

Place: ..... Tel. No. : .....

Date: ..... E-mail Address : .....

Fax : .....

Documents to be enclosed with the appeal:

- 1. Copy of the decision/rejection letter

Demand Draft of Rs. 2,500/- in favour of Pay and Accounts Officer, Department of Commerce, New Delhi.