

Have you arranged for someone to help you with your dispute? Yes No

Please tell us their name and address

Their full name Mr/Mrs/Miss/Ms
(delete as appropriate)

Their address

Postcode

Please sign here to authorise this person to act for you

ABOUT THE DECISION

What is the date at the top of the decision letter that you want to dispute?

If you think our decision is wrong, you have three choices. Please tick the **one** that applies to you:

- I would like to request a written explanation of your decision
- I would like you to look at your decision again
- I would like to make an appeal to the Tribunals Service

You can also use this form to request an explanation or reconsideration of a council tax support decision if it was made at the same time and for the same reasons as the housing benefit decision. Please tick the box that applies:

- I would like to request a written explanation of the CTS decision
- I would to request a reconsideration of the CTS decision

YOUR REASONS FOR DISPUTING THE DECISION

- Use this space to say **why** you think the decision is wrong. It is not enough to say 'I do not agree with the decision' or 'the amount of benefit awarded is not enough'.
- If you are appealing against more than one decision, you must say why you do not agree with each one.
- If you are asking us to look at the decision again or appealing more than **one month** after the decision was made, you must explain why you could not dispute the decision during the one month period.