



Appeals Lodgement Form

What action would you like to see occur?

I submit the following evidence in support of my claim:

DECLARATION

I have read and understood the REIWA Appeals Policy and declare that the other party to the appeal (if applicable) may be contacted by REIWA in an attempt to resolve the appeal. I agree that REIWA may conduct an independent assessment and that I may be requested to submit further information upon request at an interview.

Name _____

Signature _____ Date _____

OFFICE USE ONLY

Appeal Lodgement Form received by:

Name: _____

Signature _____ Date _____

Appeal file generated by:

Name: _____

Signature _____ Date _____

