Notice of Appeal

CUSTOMS APPEAL AUTHORITY



Regulation 81, Customs and Excise Regulations 1996

When to use this form

Use this form to lodge an appeal against a decision of New Zealand Customs Service.

What you need with your appeal

To complete your appeal, you need to send:

- A fully completed form
- The filing fee of \$410 (please read the payment information)

Completing this form

- You can fill in this form electronically. If you do this, you must print, sign, and submit it to the Tribunal.
- You can also print and fill in this form by hand.
 Use a black or blue pen, and print clearly IN CAPITALS.
- Answer every question on the form unless the instructions tell you otherwise

Payment information

The fee for filing an appeal is \$410.

To confirm how you pay the application fee, please visit the Ministry of Justice website:

www.justice.govt.nz/tribunals/customs-appeal-authority/apply

If you need further assistance, then please contact the Tribunal on:

Ph: 04 462 6660 Fax: 04 462 6686

Email: CAA@justice.govt.nz

Application fees are non-refundable.

Important information

If you need assistance filling in the form, please use the appeal guide which can be found where you downloaded this form.

You only need to put the organisation name if you are bringing the appeal on behalf of the organisation.

For any further information please visit justice.govt.nz/caa

Step 1. Give us your details Full name First Organisation (If applicable) What is your residential address? (This must be a physical New Zealand address) Address No. What is your postal address? Address No. Phone Day _____ Mobile ____ **Email** If you require an interpreter what language or dialect do you speak? Language _____ Step 2. Legal advisor or agent If you do not have any representation, then proceed to Step 3. Note: If you choose to be represented, all communications will be to your nominated person only. I authorise the following person to represent me: What is the name of your legal advisor or agent? (If you have one) Full name First What is their postal address? (This must be a physical New Zealand address) Address No. Street Phone Day ____ Mobile **Email**

Step 3. Decision appealed against

What is the name of the person who made the decision you are appealing (if known)?		
Full name First		Surname/Family name
Number		s to the goods in question?
What is the date thi		
Decision date	_ / /	(day/month/year)
The decision of the	Chief Executive	stated that: (please outline the points relevant to this appeal)
If you need extra spa	ace, please attach	a separate sheet to this application
Step 4. The	facts of the	ecase
Please outline the fa Authority and other p		support your appeal. Ensure there is sufficient detail to fully inform the
-		
If you need extra spa	ace, please attach	a separate sheet to this application
Step 5. Grou	ınds of app	peal
Please outline your gunderstand your grounderstand		Ensure there is sufficient detail for the Authority and other parties to
If you need extra spa	ice, please attach	a separate sheet to this application

Step 6. Supporting documents Do you have any supporting documentation to include in this application? ☐ Yes If yes, please provide the name and brief description of each document. If no, please leave blank Document 1 Document 2 Document 3 Step 7. Sign and date Signature Date Step 8. Do a quick check You have answered every question You have attached a copy of the decision you are appealing You have attached the additional documentation you listed in Step 6 You have signed and dated this form, and You have paid for the appeal Step 9. Send in this form You can fill in this form and post it to: **Customs Appeal Authority** SX 11159 Wellington New Zealand Address: Level 1, 86 Customhouse Quay, Wellington 6011

Phone: 04 462 6660