

FORM – G
(See rule 7 (1))
FORM OF FIRST APPEAL

I.D. No.....
Date

To,

The Appellate Authority
Lai Autonomous District Council,
Lawngtlai : Mizoram.

Sir,

As I have not received any decision, I am aggrieved by the decision of the State Public Information Officer, Lai Autonomous District Council, Lawngtlai, Mizoram, I hereby file this appeal. The particulars of my application is as under :

1. Name of the Appellant :
2. Address of the Appellant :
3. (a) Name of the State Public Information Officer
(b) Address of the State Public Information Officer
(c) Department/Office and Address :
(d) Particulars of the decision against which the appeal is preferred including the No. and date of such decision :
4. Date of application submitted in Form A :
5. Details of information :
 - (1) Information asked for :
 - (2) Period for which information is sought for :
6. Date as on completion of 30 days after submitting application in Form A :
7. Reason for Appeal :
 - (a) No decision is received within 30 days of submitting application Form A :
 - (b) Aggrieved by the decision of the State Public Information Officer dated :
8. Ground for appeal, Brief facts of the case :
9. Last date for filling the appeal :
10. Prayer relief sought for :

I hereby state that the information and particulars given above are true to the best of my knowledge and belief .

Place :.....

Date

Name of Appellant :

Signature of Appellant

:

E-Mail address, if any:

Telephone No.

(Office)

(Residence)

..... Cut from here.....

From :
The State Public Information Officer,
Lai Autonomous District Council,
Lawngtlai : Mizoram.

No.....

Dt.....

1. Received an appeal application of
Shri/Smt..... a resident of
..... In Form G prescribed under sub-Rule
(1) of Rule 6 of the Lai Autonomous District Council Right to Information
rules, 2006.

Signature of the
recipient
Office of the Appellate
Authority
E-Mail address, if any:
Telephone No. (Office)
:
(Resident) :