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**Carlow County Council**

**APPEALS FORM VACANT PROPERTY REFURBISHMENT GRANT**

***Please note all appeals should be submitted to the local authority on this form only within 3 weeks of the date of the original refusal decision.***

**Local Authority Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Local Authority Grant Reference Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Grant applicant name(s): ­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date of Local Authority grant refusal letter: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email address for correspondence: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address of Vacant property (including Eircode):**

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1. Below please provide the reason given by local authority for refusal of the grant application, as per the refusal letter issued.
2. In the text box below please outline the grounds on which you are appealing the decision of the local authority and the reasons why you consider the decision to be incorrect:

Any relevant supporting documentation to support the grounds of your appeal can be submitted to the local authority along with this completed form.

***Note: Your appeal will be reviewed and decided upon by a more senior member of staff in the local authority who was not involved in the original assessment of your application, and they will contact you with their decision. It may take up to six weeks for a decision on your appeal to issue. If you are unhappy with the response you receive from the Local Authority, you can bring a complaint to the Ombudsman. More details on the role of the Ombudsman, can be found at*** [***https://ombudsman.ie/en/***](https://ombudsman.ie/en/)