

If you wish to appeal against the penalty, please fill in this form (in capitals) to give us the information we need to consider the matter.

If there is a hearing by the General Commissioners, please '✓' one of the boxes below.

I want to be heard by the Commissioners for the area where:

I live I work I have business premises

Please give the address to the box you have ticked above along with your name.

Full name
Address
Postcode

Tax Reference
from top right-hand corner of penalty notice

include Employer Reference where shown

Date of penalty notice

 / /

I wish to appeal against the penalty of

£

for the year ended 5 April

enter year

Please give the reason for your appeal

Tax Return lost in the post - I enclose a copy of the Return Serious illness of taxpayer, or a close relative or domestic partner Other *please specify*
 Tax Return delayed in the post Bereavement

and say when and what happened

Date

continue overleaf if necessary

Signature of taxpayer or adviser

Date

 / /

Daytime telephone number

Agent's name and address *if appropriate*

Full name
Address
Postcode