

"B"

APPEAL

From:

To:

Name: _____

Public Grievance Officer

Address: _____

Address _____

Previous Grievance date: _____ (to enclose copy)

Reply of Grievance Officer date: _____ (Copy of reply to enclose)

Vide Para 7.1 of the Scheme of Public Grievance Redressal, I appeal against the reply of Public Grievance Officer / other Official to my Grievance dated _____ on the subject _____.

Date: _____

(Signature)

Name _____

Encl.: if any (for supporting Grievance)

Note:- Clear reasons as to why the reply is not satisfactory need to be stated while submitting the Appeal