

## Appeal against an in Country [Asylum/Immigration] Decision

### Information sheet

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Complete this form if you are appealing from **inside** the United Kingdom and you have the right to do so. To help you complete this form, refer to the guidance provided. Help can also be found at <https://www.gov.uk/immigration-asylum-tribunal>.

**You can also lodge your appeal online and pay your fee at <https://immigrationappealonline.justice.gov.uk/IACFees>**

Please retain this information sheet.

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#### Completing the form

The completed form should be:

- Written in **English**
- Written in **BLOCK CAPITAL LETTERS** using black ink
- Received by the Tribunal at the address shown on bottom of Part B no later than **14 Calendar days** after you are sent the Refusal Letter by the Home Office.

Please tick the boxes where appropriate, to show your answer.

#### Checklist

Before you submit your appeal use the checklist below to ensure that we can successfully create your appeal.

- Have you provided credit/debit card details?
- Have you enclosed a copy of your **Refusal Letter**?
- Have you enclosed a copy of the **Reasons for Refusal** which were attached to your Refusal Letter?
- Have you provided details of the **Grounds** of your appeal?
- Have you provided us with **Out of Time reasons** (if applicable)?
- Have you provided us with photocopies of your documents?  
(Do not send original documents e.g. Passport, Marriage/Birth certificate/ID Card)
- Have you completed **all** the relevant sections?
- Have you signed the three declarations at page 1, page 11 and page 12?

**Please Note:** Incomplete appeal forms will be returned to addressee.

# Appeal against a post IA 2014 In Country [Asylum/Immigration] Decision

## Information sheet

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### Returning the form

- Please detach this information sheet to keep for your records; please do not send it with the completed form.
- You must send **all pages** of a completed form to the First-tier Tribunal in the United Kingdom together with your fee (if applicable) by providing us with your credit/debit card details on page 1.
- **Please note, we are unable to accept cash, cheques or American Express.**
- To avoid delays to your appeal, you can submit your appeal online (see link on top of page 1) where you can pay your fee using a debit or credit card.
- If you submit your appeal without payment details, the Tribunal will write to you with further instructions about how you can pay your fee, this will delay the processing of your appeal.
- Send your completed appeal form **together with a copy of your Refusal Letter** and any other documents to the First-tier Tribunal either by **post** to:

First-tier Tribunal (Immigration and Asylum Chamber)  
PO Box 6987  
Leicester  
LE1 6ZX  
United Kingdom

by **FAX** to: 0044 (0)870 739 4053 **Or** you can **EMAIL** to: IAGFAPPS3@justice.gov.uk

- You can either post, email, or fax your appeal but **do not more than one**, as this could cause delays to your appeal and result in payment being taken more than once.

### Documents to send

You must provide:

- The **signed and completed Appeal Form (IAFT-5) for each person wishing to appeal**
- A copy of your **Refusal Letter** (if you do not send this you must explain why)
- A copy of the **Reasons for Refusal** (which you should have received with the Refusal Letter)
- **Photocopies** of any other documents in support of your appeal (in English or a certified translation)
- A completed **Application for Anonymity** form if you do not want the Tribunal to publish your name on any court documents which can be viewed publicly.

**Please do not provide any original documents** (e.g. Passports, Marriage/ birth Certificates, Identification cards).

Handling such documents results in a delay to our process. Alternatively, you can provide photocopies.

### Changes and contacting us

You **must** notify the Tribunal in writing if you change your address or representative. If you need to contact us after you have made your appeal, the details are:

By **letter** to:  
First-tier Tribunal  
(Immigration and Asylum Chamber)  
PO Box 6987  
Leicester  
LE1 6ZX

**Telephone:** 0044 (0)300 123 1711  
**By fax to:** 0044 (0)870 739 5895  
**By e-mail:** customer.service@hmcts.gsi.gov.uk

## IAFT-5

# Appeal against a post IA 2014 In Country [Asylum/Immigration] Decision

## Paying your appeal fee

Unless your appeal is of a type exempt from payment, you are in receipt of Legal Aid or Asylum Support, services or accommodation under s17 or s20 of the Children Act 1989 (or equivalent in Scotland, Northern Ireland or Wales), or if the Home Office waived the fee for the application that the refusal notice you are appealing relates to under exceptions 4.5 or 9.4 of the Immigration and Nationality (Fees) Regulations 2016, or you have applied for and received a fee remission under the Lord Chancellor's exceptional power **you will need to pay a fee**. If you do not do so, your appeal will either be rejected or struck-out without a decision being made on it.

More information about the circumstances where you do not have to pay a fee can be found in our fees guidance leaflet T495 (where you are appealing a decision dated between 19 December 2011 and 9 October 2016) or the T495A (if you are appealing a decision dated 10 October 2016 and after) both available from <http://hmctsformfinder.justice.gov.uk>

To pay your fee using a payment card, please provide the details below. You should ensure that the payment card you provide has sufficient credit to cover the fee, which will be taken in Pounds Sterling. If your card is declined then your appeal will be delayed whilst we contact you for an alternative payment.

**Please note that as an alternative to sending this form to the Tribunal, you can lodge and pay your appeal online at <https://immigrationappealonline.justice.gov.uk/IACFees>**

If you are unable to pay now using a payment card, you should send your appeal ensuring that you sign the declaration on page 11 to indicate that you understand that a fee is payable, and will pay the fee when given instructions to pay by alternative methods.

Tribunal staff, on behalf of the Lord Chancellor, will write to you once your appeal is received, providing you with details of the methods available for you to pay your fee.

**Please note, we are unable to accept cash, cheques or American Express.**

### Payment card details

If you are paying your fee by payment card, please enter the details below. You should ensure that you enter them carefully since if the Tribunal is unable to process these details it could delay your appeal. **Do not send in your credit card details to us more than once** unless we write to you asking that you submit further card details to us.

Once your payment has been processed, the Tribunal will destroy your card details.

**By completing the details below, you authorise HM Courts and Tribunals Service to debit from the payment card the appropriate fee for your appeal.**

Signed (cardholder)	<input type="text"/>	Date	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Name	<input type="text"/>						
Email receipt required? (if yes, please tick box)	<input type="checkbox"/>	Email address	<input type="text"/>				
Card number	<input type="text"/>	-	<input type="text"/>	-	<input type="text"/>	-	<input type="text"/>
Name on the Card	<input type="text"/>						
Start date (mm/yy)	<input type="text"/>	<input type="text"/>	Expiry date (mm/yy)	<input type="text"/>	<input type="text"/>		

IAFT-5

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Form IAF5-5

**Appeal against a post IA 2014 In Country [Asylum/Immigration] Decision**

**a. Do you want to have your appeal decided at an oral hearing or on the papers?** (tick one box)

**Oral Hearing** You should tick the 'oral hearing' box if you want to have an oral hearing that you and/or your representative plan to attend. You will need to pay the appropriate fee for an oral hearing.

**Paper Hearing** You should tick the 'paper hearing' box if no one will attend and you want to have your case determined on the papers provided. You will need to pay the appropriate fee for a paper hearing.

**b.** If you have chosen to have an oral hearing, please mark the box of anyone who will be attending your hearing.

Sponsor  Your representative

Witness

**c.** Are you in receipt of legal aid funding, services or accommodation under s17 or s20 of the Children's Act 1989 (or equivalent in Scotland, Northern Ireland or Wales), Asylum Support or was the Home Office fee for the application refused in this case waived under exceptions 4.5 or 9.4 of the 2016 Fee Regulations

Legal Aid  Asylum Support

Section 17 or 20  No (If no, complete payment details on page 1)

Home Office Waiver

**You should provide a reference and any supporting documents. Failure to do so may result in a fee being required.**

Legal Aid/Asylum support Ref Number:

**d.** Are you paying for the appeals of any member of your family or anyone planning to appeal against an immigration decision?

Yes  No  
(If yes, give details in the table below)

**You should note that the total fee you pay will be calculated by the Tribunal based on this information** (continue on a separate sheet if required).

Name	Relationship	Appeal number/ Post reference number

Please see page 1 for details of how to pay a fee

**For Staff Use Only**

Lord Chancellor's Certificate of Fee Satisfaction issued Date / /

No Lord Chancellor's Certificate of Fee Satisfaction issued Date / /

IAFT-5

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Form IAF5-5

**Appeal against your Home Office decision**

**Appeal Lodged:**  
(For FTT(IAC) use only)

**Type of Decision:**

(tick one box)

- Protection (PA)
- Human Rights (HU)
- Revocation of Protection Status (RP)
- EEA (EA)
- Deprivation of Citizenship (DC)

**Section 1 – Personal Information**

**a.** Family name or surname  
(for instance as shown on your passport)

**b.** Given or first name(s)  
(for instance as shown on your passport)

**c.** Title

Mr  Mrs  Miss  Ms  Other \_\_\_\_\_

**d.** Date of birth (Day/Month/Year)

/  /

**e.** Gender

Male  Female

**f.** Address where you can be contacted.

**Notice:** If you are detained, please provide the address where you are currently held (Prison, IRC or Detention centre)

**Notice:** If you change your address, you **must** notify the First-tier Tribunal immediately in writing.

Postcode:

**g.** Appellant's email address

**h.** Prison Reference (if applicable)

**i.** Nationality (if more than one, state all)

**j.** If you have chosen to have an oral hearing, who will be attending?

Yourself  Your representative  Witnesses

**k.** Will anyone giving evidence at the hearing need an interpreter?

Yes (If yes, give details below)  No

If more than one language or interpreter is required, you may wish to indicate on a separate sheet.

Please do not request an English interpreter.

Who:

Language:

Dialect:

**l.** If anyone attending the hearing has a disability, state any special requirements they have.

**If you are detained under the Immigration Acts or in prison serving a criminal sentence, please provide the following information:**

- m.** Are removal directions currently set for your removal?  Yes  No
- n.** Time of removal (insert time and circle AM or PM)     AM / PM
- o.** Date of removal   /   /
- p.** Are you currently serving a criminal sentence?  Yes  No
- q.** If yes, what date is your sentence due to end?   /   /
- r.** What category prisoner are you? A B C D  
(please circle as appropriate)

**Section 2 – Your Home Office Decision** (refer to your Refusal Letter)

- a.** Home Office reference number  /
- b.** Port reference  /
- c.** COHID reference
- d.** Home Office A-N reference
- e.** Date of Application to Home Office   /   /
- f.** Date of Home Office Decision   /   /
- g.** Method of service of decision  Post  Fax/Personal service  
 Courier  Other (please specify)
- h.** Date Refusal Letter sent by Home Office   /   /
- i.** Have you been served with a deportation decision?  Yes  No
- j.** If you are **not** sending in your Refusal Letter please explain why in this box:

**Applying for Anonymity**

The Tribunal will publish your name on documents relating to your case which can be viewed publicly. You can apply to the Tribunal for anonymity which, when granted, will result in the Tribunal removing your name from all published documents.

The Application for Anonymity form can be found online at <http://hmctsformfinder.justice.gov.uk/HMCTS/FormFinder.do> and should be completed and returned with this appeal form.



### Section 3 – Your Appeal

Your appeal must be received at the **Tribunal via the address** shown on Part B of the information sheet no later than **14 Calendar days** after you are sent the Refusal Letter by the Home Office.

**a. Late appeal**

If you know your appeal is late, or you are not sure if it will be received in time, you must apply for an extension of time. Explain why your appeal is late in this box below. Attach any evidence /additional sheets if necessary.

**b.** If you are sending any other documents with this form to support your appeal, they must be in English or a certified translation. Please list them here:

**c.** If you are **intending** to send other documents which you intend to rely on at the hearing but have not yet been made available to you, please list them here:

#### d. Grounds of your appeal

- You **must** let us know the reasons you disagree with the decision on the in the Refusal Letter document.
- Include any information that has not been mentioned in the Refusal Letter and say whether you have raised these issues before.
- You **must** give as much detail as possible and should raise all the grounds of appeal you wish to rely on. The Tribunal is not permitted to consider grounds that you raise which have not been the subject of a decision by the Home Office unless the Home Office agrees to the Tribunal considering those new grounds.
- Attach any evidence/additional sheets of paper if necessary.
- If your appeal relates in whole or in part to a refusal of a **Protection claim**, complete **boxes 1 and/or 2** that apply to you.
- If your appeal relates only to the refusal of a **Human Rights claim**, complete **box 3**.
- If your appeal relates only to a **Revocation of Protection Status Decision**, complete all of **boxes 4 and 5** that apply to you.
- If your appeal relates in whole or in part to an **EEA Decision**, complete **box 6**.
- If you are not sure which boxes apply to you or if your appeal is against the **Deprivation of Citizenship** write your grounds in **box 7**.

#### Protection Decision

1. Please explain why your removal from the United Kingdom would breach the United Kingdom's obligations under the Refugee Convention.

2. Please explain why your removal from the United Kingdom would breach the United Kingdom's obligations in relation to persons eligible for a grant of humanitarian protection.

### **Human Rights Decision**

- 3.** Please explain why the decision to refuse your human rights claim is unlawful under section 6 of the Human Rights Act 1998. You should specify which article of the Human Rights Act you are appealing under.

### **Revocation of Protection Status Decision**

- 4.** Please explain why the decision to revoke your protection status breaches the United Kingdom's obligations under the Refugee Convention.

- 5.** Please explain why the decision to revoke your protection status breaches the United Kingdom's obligations in relation to persons eligible for humanitarian protection.

**EEA Decision**

6. If you feel that the Home Office decision is restricting your rights under the EEA right to free movement, please explain why.

**Deprivation of Citizenship Decision**

7. If you are unsure which box to complete or if your appeal is against the deprivation of citizenship please provide details in this box.

**e. New Matters**

Please describe in this box any new reasons for:

- wishing to enter or remain in the UK, or
- grounds on which you should be permitted to enter or remain in the UK, or
- grounds on which you should not be removed from or required to leave the UK **provided that** you have already informed the Home Office about these reasons in response to a notice served on you in terms of section 120 of the Nationality, Immigration and Asylum Act 2002.

**f.** Have you appealed against any other immigration decision in the United Kingdom or overseas?

Yes If yes, give details below

No

Date	Appeal number (if known)
□□/□□/□□□□	
□□/□□/□□□□	
□□/□□/□□□□	

**g.** To the best of your knowledge and belief has any member of your family, a Dependant or anyone planning to accompany you made an appeal or are they planning to appeal against a United Kingdom immigration decision?

Yes If yes, give details in the table below

No

Name	Relationship	Appeal number/ HO reference number

### Section 4 – Your declaration

If you are the appellant and are completing this form yourself, you must sign and date this declaration.

#### Declaration by appellant

I, the appellant, believe the facts stated in this appeal form are true.

If a fee is payable for my appeal, if I have not provided fee payment, payment card details or the evidence to support remission, I undertake to pay the fee in accordance with the instructions I receive from the Tribunal or to provide the appropriate evidence for the remission. I therefore apply for a Lord Chancellor’s Certificate of Fee Satisfaction.

Signature:

Date:

/
/




#### Data Protection statement

Information, including personal details that you have provided in this form will not be used by the First-tier Tribunal, for any purpose other than the determination of your application. The information may be disclosed to other government departments and public authorities only, for related immigration purposes.

## Section 5 – Representative details (refer to guidance notes)

a. Name of Representative

b. Name of Representative's Organisation  
(if any)

c. Postal address for correspondence

Postcode:

d. Reference for correspondence

e. Telephone number

f. Mobile telephone number

g. Fax number

h. Email address

i. Legal Aid reference number

j. Legal Aid Area

### Declaration by the representative – to be completed only when signing on behalf of the person named in Section 1 of this form

I, the representative, am giving notice of appeal in accordance with the appellant's instructions and the appellant believes that the facts stated in this appeal form are true.

Representative's Signature:

Date:

### Legal Aid

I, the representative certify that the appellant is in receipt of Legal Aid and is therefore exempt from paying a fee on this appeal.

Representative's Signature:

Date:

### Notice to representatives

You must notify the First-tier Tribunal, and other parties, if you cease to represent the appellant. If the appellant changes representative, details of the new representative should be sent to the same address to which you are sending this form. Please give **the appellant's full name, address, and Post Reference number**.