

**TAXATION
DISCIPLINARY
BOARD**

TDB []

TAXATION DISCIPLINARY BOARD

v

[]

[CIOT/ATT Membership no.]

RESPONSE FORM

Please read the accompanying Guidance Notes and complete this form and return it by no later than [] to NBremner@tax-board.org.uk

<p>Section 1 (See Guidance Note paragraph 17)</p>		
<p>The Charge(s) against you are as follows. Please indicate with a tick (✓) whether you accept or Contest each Charge.</p> <p>If you contest any of these Charges, please state shortly your reasons.</p> <p>If you accept any of the Charges, please provide any explanation or mitigation.</p> <p><i>Note. It will be enough to say that all the facts on which it is based are untrue; or if you admit some of them, to say which you admit and which you contest. If you say that the facts are true but do not constitute a disciplinary offence, then you should say briefly why.</i></p> <p>Please continue on a separate sheet if necessary.</p>		
<p>Charge 1</p>	<p>Accept</p>	<p>Contest</p>

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Charge 2	Accept	Contest

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Charge 3	Accept	Contest

Charge 4	Accept	Contest

<p>Section 2 (See Guidance Note paragraph 18) Please delete answer options as appropriate</p>		
<p>Do you wish to have an oral hearing which you will attend?</p>	<p>Yes</p>	<p>No</p>
<p>If you do not attend, do you agree to the hearing taking place in your absence?</p>	<p>Yes</p>	<p>No</p>
<p>Will you be providing any further documents or written representations in addition to your comments on the Charges in Section 1 above?</p>	<p>Yes</p>	<p>No</p>

<p>If you wish to attend the hearing, will you be represented?</p>	<p>Yes</p>	<p>No</p>
<p>If you answered “yes” please state the name and address telephone and e-mail address of your representative:</p> <p>Name: _____</p> <p>Address: _____</p> <p>_____</p> <p>_____</p> <p>Email: _____ Telephone _____</p> <p>Do you wish all further papers to be sent to him/her?</p>	<p>Yes</p>	<p>No</p>

<p>Section 3 (See Guidance notes paragraph 19)</p>		
<p>Do you intend to call any witnesses at the Hearing? If so, please provide details:</p>	<p>Yes</p>	<p>No</p>

<p>Section 4 (See Guidance Note paragraph 18) Please delete answer options as appropriate</p>		
<p>If you wish to have an oral hearing, do you wish to apply for this to be held in private? If yes, please state shortly why you think that the Hearing should not be in public .</p>	<p>Yes</p>	<p>No</p>
<p>Do you have any disability which should be taken into account in making arrangements for the hearing? If so, please give brief necessary particulars:</p>	<p>Yes</p>	<p>No</p>
<p>Do you consent to all future communications being by email? If so, please confirm your email address:</p> <p>-----</p>	<p>Yes</p>	<p>No</p>

Signed.....

Dated.....