

## Appeals against Decisions of Stewards

### PROCEDURE

Pursuant to section 76(1)(b) of the *Racing Regulation and Integrity Act 2024*, a person may appeal to the Tasmanian Racing Appeal Board if the person is aggrieved by the decision of the stewards to:

- (i) impose a fine on a person, or
- (ii) impose a suspension or disqualification on the person or on a horse or greyhound owned, leased or trained by the person.

A Notice of Appeal form (see next page) must be lodged with the Secretary as follows:

- (a) For a minor appeal (against a decision of the steward to impose a fine not exceeding \$2,000 or a suspension for a period not exceeding 30 days\*) documents **MUST** be lodged within **seven (7)** days after the making of the relevant decision together with a deposit of **\$200.00**.
- (b) For a major appeal (appeals other than a minor appeal) documents **MUST** be lodged within **fourteen (14)** days after the making of the relevant decision together with a deposit of **\$500.00**.

\*If the penalty is expressed in race dates, please ensure that you ascertain how many calendar days that relates to.

### PLEASE NOTE:

- **Part (or all) of your deposit may be forfeited depending on the outcome of the appeal.**
- **You may also be required to pay some (or all) of the transcript costs.**

**For further information see section 99 of the *Racing Regulation and Integrity Act 2024*.**

**Please lodge your appeal by completing the following form: Notice and Grounds of Appeal**

This form sets out the basic information you need to provide when you lodge an appeal or apply to have the operation of the decision or a penalty against which you are appealing suspended pending the appeal. If you require assistance to complete the form, then please contact the secretary of the Tasmanian Racing Appeals Board or seek legal advice.

For further information contact the TRAB Secretary on **(03) 6777 2063**.

# Notice and Grounds of Appeal

The Secretary  
Tasmanian Racing Appeal Board  
PO Box 821  
LAUNCESTON, TAS 7250

Dear Secretary,

I, , wish to lodge an appeal with the Tasmanian Racing Appeal Board as follows:

1. Date of offence:

2. Race meeting (if applicable):  Race No. (if applicable):  Animal Name (if applicable):

3. Date penalty imposed:  Rule charged under:

4. Offence:  Penalty imposed (if applicable):

5. The appeal is against:  Conviction and penalty **OR**  penalty only

6. I will be represented at the hearing:  Yes  No

If yes, please indicate whether the representative is a:  Lawyer **OR**  an Advocate/Non-Lawyer

Name of representative:  Contact Phone:  Email:

7. The grounds of appeal are:

8. There are dates that I am unavailable to attend a hearing:  Yes  No

If yes, please provide details:

Please estimate how long the hearing may take:  Fewer than 2 hours  2-4 hours  More than 4 hours

9. I wish to request that the Chairperson of the Tasmanian Racing Appeal Board suspends the operation of the decision or penalty pending the appeal:  Yes  No

**If yes**, please complete the Request to Suspend a Decision section and Applicant details and signature section overleaf.

**If no**, please complete the Applicant details and signature section overleaf.

## Request to Suspend a Decision or Penalty

I hereby request the Chairperson of the Tasmanian Racing Appeal Board to suspend the operation of the decision or penalty against which I am appealing until my appeal is heard. This request is made pursuant to section 85 of the *Racing Regulation and Integrity Act 2024*. When considering my request, I would like the Chairperson to take into account the following matters:

**PLEASE NOTE**

The Chairperson is not obliged to grant the request. The Chairperson must not grant the request if:

- (a) the decision was made, or the penalty imposed because of a serious risk to:
  - (i) the welfare or health of an animal; or
  - (ii) the safety of any person; or
  - (iii) the integrity of The Tasmanian racing industry; or
- (b) the appeal is intended to be heard within 7 days of lodgement, unless the Chairperson considers that extenuating circumstances require otherwise.


**APPLICANT DETAILS AND SIGNATURE**

Name:  Phone No.

Mobile:  Email:

Postal Address:  Suburb:  State:  Postcode:

Signature of Applicant:  Date:

 PDF Users: Select the Sign Tool to apply your signature.

**OFFICE USE ONLY**

RECEIPT NO.:  DATE: