

**COVER SHEET**

It is requested that this cover form is used when submitting a procedural document to the Board of Appeal of the European Union Agency for the Cooperation of Energy Regulators in appeal proceedings within the meaning of Article 28 of Regulation (EU) 2019/942.

Please note that this form cannot be submitted on its own. It should always be accompanied by a written submission or pleading.

Please read the Rules of Procedure (*Decision BoA No 1-2011, laying down the rules of organization and procedure of the Board of Appeal of the European Union Agency for the Cooperation of Energy Regulators*) and the "Practice Directions to Parties of Appeal proceedings before the Board of Appeal of the European Union Agency for the Cooperation of Energy Regulators" before completing this form.

The latest versions of the Rules of Procedure, the Practice Directions and this form can be downloaded here:

[https://www.acer.europa.eu/en/The\\_agency/Organisation/Board\\_of\\_Appeal/Pages/Procedural-Documents.aspx](https://www.acer.europa.eu/en/The_agency/Organisation/Board_of_Appeal/Pages/Procedural-Documents.aspx)

This form can be completed on screen. If you are completing the form by hand, please write legibly using black or blue ink. Electronically sent procedural documents and their annexes should be labelled according to their content.

Date of Submission:	Name:	Signature:

**I. GENERAL INFORMATION**

<b>A- -</b> (Appeal number if already notified)	(Contested decision number, if no appeal number)
--	--

<b>TITLE OF PROCEDURAL DOCUMENT:</b>	
(notice of appeal, defence, application for leave to intervene, etc.)	

<b>PERSON SUBMITTING THE DOCUMENT:</b>	Role in the proceeding:
Name (legal entity or first name and surname):	
Address:	

<b>REPRESENTATIVE appointed</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Name (legal entity or first name and surname):	
Address:	

<b>Address for service (if different from above):</b>

<b>Agreement on accepting service by e-mail and/or fax (person or representative):</b>	
By email <input type="checkbox"/> Yes <input type="checkbox"/> No	E-mail for service:
By fax <input type="checkbox"/> Yes <input type="checkbox"/> No	Fax for service:

<b>Telephone, e-mail and/or fax for communication other than service (person or representative):</b>	
Telephone:	Fax:
E-mail:	
<b>Language</b>	<input type="checkbox"/> English <input type="checkbox"/> Other (please specify):

Date of Submission:	Name:	Signature:

Requests in accordance with the Rules of Procedure and Practice Direction of the Board of Appeal	
Confidentiality request <sup>1</sup>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Request for oral hearing	<input type="checkbox"/> Yes <input type="checkbox"/> No
Request for suspension	<input type="checkbox"/> Yes <input type="checkbox"/> No
Request for access to documents	<input type="checkbox"/> Yes <input type="checkbox"/> No
Other requests in accordance with the Rules of Procedure and Practice Direction of the Board of Appeal (please specify)	
<p>Note: The parties are requested to indicate all the procedural remedies sought in the conclusions of their pleadings.</p>	

<sup>1</sup> Please note that, in accordance with Article 13 of the Rules of Procedure and Article 4.1 of the Practice Directions, any request for confidentiality shall be made in writing at the time the document is lodged, under a separate heading of the procedural document in question or by a separate application lodged together with the principal document, and shall indicate the relevant words, figures or passages for which confidentiality is claimed, together with sufficiently detailed reasons for that request.

Date of Submission:	Name:	Signature:

**II. TABLE OF ANNEXES**

List of Annexes		
ANNEX NO.	NAME AND TYPE OF ANNEX Each annex should be numbered, listed and described individually. Please indicate with “yes” or “no” whether the annex is presented as evidence.	EVIDENCE YES / NO

Date of Submission:	Name:	Signature:
---------------------	-------	------------

**III.CONFIDENTIALITY REQUEST**

Each confidentiality claim should be identified with the exact localization in the pleading or annex. A detailed justification shall be provided for the maintenance of confidentiality.		
PAGE AND PROCEDURAL DOCUMENT	IDENTIFICATION OF BODY OF THE TEXT OR DOCUMENT	JUSTIFICATION

Date of Submission:	Name:	Signature:
---------------------	-------	------------

## IV. ANNOUNCEMENT OF APPEAL<sup>2</sup>

**Case:** A-[NNN]-[YYYY]

**Appellant:**

**Appeal received on:** [DD Month YYYY]

**Subject matter:**

**Keywords:**

**Contested decision  
Number:**

**Language of the case:**

### Remedy sought by the Appellant (including procedural requests)

The Appellant requests the Board of Appeal to:

- [...]
- [...]

The Appellant includes the following procedural requests:

### Pleas in law and main arguments

The contested decision was adopted on [...]

The Appellant contests the Agency's decision. The Appellant's claims and arguments can be summarised as follows:

1. [...]
2. [...]
3. [...]

### Further information

More information on the appeal procedure can be found on the 'Appeals' section of the Agency's website:

[https://www.acer.europa.eu/en/The\\_agency/Organisation/Board\\_of\\_Appeal/Pages/Procedural-Documents.aspx](https://www.acer.europa.eu/en/The_agency/Organisation/Board_of_Appeal/Pages/Procedural-Documents.aspx)

<sup>2</sup> Announcement published in accordance with Article 9 of Decision BoA No1-2011 Laying down the rules of organisation and procedure of the Board of Appeal of the Agency for the Cooperation of the Energy Regulators.

Date of Submission:	Name:	Signature:
---------------------	-------	------------

**V. Checklist supporting the filing of an appeal**

- Appellant's name and address**
- Proof of existence in law**, if the appellant is a legal person
- Representative**: name and business address, if appointed
- Power of attorney**, if a representative is appointed
- Acceptance of electronic service/method chosen**: fax – e-mail
- Fax number and/or e-mail address**, if service accepted using fax and/or e-mail
- The number of the Agency's contested decision**
- What is contested in the decision**
- Remedy sought**
- All the pleas in law and arguments of fact and law** relied on
- All the evidence and information related to that evidence**<sup>3</sup>
- Summary of the dispute**<sup>4</sup>
- Confidentiality request**, if applicable
- Request for oral Hearing**, if applicable
- Request for Suspension**, if applicable
- Request for Access to Documents**, if applicable
- Signature and date**
- Copies**: sufficient number<sup>5</sup>
- Numbered paragraphs**
- Pagination**: consecutive numbering

<sup>3</sup> It is recommended to use the COVER SHEET as suggested on page 1.

<sup>4</sup> See Practice Directions, paragraph 10.

<sup>5</sup> See Article 2 of the Practice Directions.

Date of Submission:	Name:	Signature: