

TRAVAIL SÉCURITAIRE NB Notice of Appeal (order, advice or administrative penalty)

Use this form to appeal an order, advice or administrative penalty (AP) issued under New Brunswick's Occupational Health and Safety Act or its regulations. The notice of appeal must be filed within 14 calendar days of receiving the order, advice or administrative penalty.

IMPORTANT: To avoid loss of information, save this form on a local drive before entering your information!

What are you appealing?								
Order Advice Administrative penalty								
Complete section 1 if a pers Complete section 2 if an org administrative penalty.						administrative penalty. supplier) received the order or		
1. Individual (employee								
Name	Position / title							
Street address	·			Apt. no.				
Town/City	Postal code			Email address				
Phone number (cell)	Phone number (home)		Phone number (work/other)		other)	Preferred time to call Morning Afternoon		
2. Organization (employer, contractor, subcontractor, owner or supplier)								
Organization name	Contact person		Position		Position /	title		
Street address				Apt. no.				
Town/City	Pos	tal code		Email add	lress			
Phone number (cell)	Phone number (home)		Phone number (work/other)		other)	Preferred time to call Morning Afternoon		
3. Order, advice or adı	ministrat	ive penalty	informati	on				
Date of order, advice or administrative penalty (yyyy-mm-dd)			Inspection report number*					
Order number(s), if applicable*			Administrative penalty number(s), if applicable*					

* The inspection report number is on the bottom right corner of each page of the inspection report. The order number is on the left side of the inspection report before the explanation of the order. There may be more than one order on the report and more than

one order can be appealed. The AP reference number is at the top right of the Notice of Administrative Penalty.



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4. Appeal reason
Explain the reason(s) for your appeal (attach an additional sheet of paper if necessary).
5. Suspension
Are you requesting a suspension of the order or administrative penalty while the appeal is reviewed? Yes No
If "yes", please explain the reason(s).

6. Declaration and consent I declare that that all the information provided by me is true and correct to the best of my knowledge. I understand that submitting false information may result in the dismissal of my appeal.							
Name	Signature	Date (yyyy-mm-dd)					
7. Confirmation and submission Before submitting, Have you completed all required sections							

Have you attached a copy of the associated WorkSafeNB officer inspection report or Notice of Administrative Penalty?

Here are your options for submitting your Notice of Appeal (order, advice or administrative penalty):

Email form

Email

To submit your application by email, select the "email form" button. The button opens your email program and populates our email address (compliance.conformite@ws-ts.nb.ca). You must still attach the completed form (along with the copy of the associated WorkSafeNB officer inspection report or Notice of Administrative Penalty). WorkSafeNB reminds you that submitting documents through unsecure email networks increases privacy concerns. For more information, please read WorkSafeNB's Access to Privacy and Information statement.

Mail

WorkSafeNB

Attention: Chief Compliance Officer

1 Portland Street

PO Box 160, Saint John, NB E2L 3X9

(We recommend using certified or registered mail to help ensure delivery within the 14-day limit.)

Fax

Toll-free 1 888 629-4722

506 738-4099

(Attention: Chief Compliance Officer)

WorkSafe NB collects information on this form for the purpose of administering New Brunswick's Occupational Health and Safety Act and its regulations. WorkSafe NB adheres to the Right to Information and Protection of Privacy Act (RTIPPA) and the Personal Health Information Privacy and Access Act (PHIPAA).