

**PRIVATE COLUMBARIA APPEAL BOARD**

**NOTICE OF HEARING**

Appeal No. xxx/xxxx

In the matter of the appeal lodged by .....  
(Appellant) against the decision of .....  
under section \_\_ of the Private Columbaria Ordinance (Cap. 630) on  
the .....day of .....

To : ..... (Appellant)

And to ..... (the Private Columbaria Licensing Board or the  
Director of Food and Environmental Hygiene (as the case may be))

TAKE NOTICE that the above appeal will be heard  
at .....  
on the .....day of .....20.....at .....a.m. / p.m.

FURTHER TAKE NOTICE that, pursuant to section 86(4) of the Private  
Columbaria Ordinance, if you fail to appear on the date set for the hearing of the appeal  
above without showing reasonable cause for the failure, the Appeal Board may proceed  
to hear any other party entitled to appear; and make its decision without hearing the  
absent party.

Dated this .....day of.....20.....

.....  
Presiding Officer of the Private Columbaria Appeal Board