**Appendix 'B'**

**Form of notice of acceptance of the invitation to opt in**

(Please use the details and text below to submit to PSAA your authority’s formal notice of acceptance of the invitation to opt into the appointing person arrangements)

To: [appointingperson@psaa.co.uk](mailto:appointingperson@psaa.co.uk)

Subject: [Name of authority]

**Notice of acceptance of the invitation to become an opted-in authority**

This email is notice of the acceptance of your invitation dated 27 October 2016 to become an opted-in authority for the purposes of the appointment of our auditor under the provisions of the Local Audit and Accountability Act 2014 and the requirements of the Local Audit (Appointing Person) Regulations 2015.

I confirm that [name of authority] has made the decision to accept your invitation to become an opted-in authority in accordance with the decision making requirements of the Regulations and that I am authorised to sign this notice of acceptance on behalf of the authority.

Name: [Name of signatory]

Title: [Role title] (authorised officer)

For and on behalf of: [Name of authority]

Date: