This form provides evidence that the landowner consents for the described Stronger Country Communities Fund Round Four project, if successful, to take place at the property listed below.

For completion by the applicant:

|  |  |
| --- | --- |
| Project Applicant |  |
| Application ID |  |
| Project Title |  |
| Brief Project Description |  |
| Project Address |  |

If your organisation is leasing the property or land and the lease includes permission to conduct the described project activities, please attach a copy of the lease agreement.

Attached:  Yes  No

For completion by landowner or Delegated Authority (including Lessee):

|  |  |
| --- | --- |
| Organisation Name: (include ABN/ACN) |  |
| Postal Address: |  |
| Email Address: |  |
| Contact Tel No: |  |

What is the relationship between the land and the applicant organisation?

Leaseholder  Free use  Owner

As the landowner (or their Delegated Authority), I give consent for the project to take place at the property listed above:

From / / \_

Until / / \_

No End Date

Signed: Date:

Printed Name:

Questions? please contact us at: **Email: sccf.enquirires@regional.nsw.gov.au** **Phone:** 1300 679 673