This form provides evidence that the landowner consents for the described Resources for Regions Round 9 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:**[regionalnsw.business@regional.nsw.gov.au](mailto:regionalnsw.business@regional.nsw.gov.au) **Phone:** 1300 679 673