Landowner Consent Form

Tennis NSW Facility Enhancement Fund (FEF)



This form provides evidence for landowner consent for the described project.

For completion by the appl	icant:
Applicant Organisation	
Application ID	
Project Title	
Brief Project Description	
Project Address	
What is the relationship bet to take place?	tween applicant organisation and the land on which the project
Leaseholder	Expiry date of lease:
Licence Holder (e.g.: may	be seasonal) Expiry date of licence:
Seasonal Permit Holder (How long (years) has Free use Owner	re-negotiated annually) the applicant operated at this location
For completion by landown	er or Delegated Authority (including Lessee):
Organisation Name: (include A	BN/ACN)
Postal Address:	
Contact Person Details Email Address: Phone	
Authorisation	
As the landowner (or their De property listed above:	elegated Authority), I give consent for the project to take place at the
From//	Until / / No End Date
Signed:	Date:
Printed Name:	Position Held:
Please contact Tennis NSW FEI	- Administrator with any questions on:
Email: NSWFEF@tennis.com.a	u Phone: 02 9024 7600