

## PROPERTY SERVICES (ESTATES TEAM)

## APPLICATION FORM FOR A SCOTTISH CHARITABLE INCORPORATED ORGANISATION TO LEASE LAND FOR USE AS A CONTRACTOR'S COMPOUND

This application <u>must</u> be submitted at least <u>14 days</u> prior to the proposed date of entry to <u>estates.enquiries@fife.qov.uk</u>

## THIS APPLICATION FORM MUST BE COMPLETED IN BLOCK CAPITALS AND IN BLACK INK.

(Application forms which are incomplete or lack the necessary documents and payment will be returned unprocessed)

Details of applicant
Organisation's name
Contact Name (and position in organisation)

Address

Address to which the lease should be issued (if different)

Postcode...

Postcode...

Telephone

Email Address:

Mobile

Registered address:

Charity number:

(Please provide a sit	r use as a contractor's compound. te description, street address and a 1:1250 Ordnance Survey plan or groutlined in red the land which you wish to lease).
Street	
Town	Post Code
will continue on a we	(the lease will state that it eek to week basis thereafter until terminated by either party). The proposed date least 14 days after this application form has been submitted.
Please provide deta	ils of the contract to which the compound relates.
Contract finish date Description of works	
Does the proposal re 583350).	equire planning permission? (To check please contact Planning on 01592
details:	osed to the land for which a building warrant is required? If yes, please provide
individual claim.	obtain Public Liability Insurance cover to the value of £5 million in respect of each insurance cover including a receipt for the premium must be submitted at the date of entry.
Period of cover: From	n:
Policy number:	
DECLARATION	
	e best of my knowledge and belief, the information given in this application is erial particulars have been omitted.
Signature	
Print name	
Position	