

Landlord Declaration Form

If you are a tenant or contractual licensee with management control of land covered by this application, and your tenancy agreement or management contract has less than 5 years to run, your Landlord or Principal Tenant (in the case of a sub-tenancy) must undertake jointly with you to take over your responsibilities to continue to manage the relevant land if you cease to have management control over part or all of the land.

Please note that land taken on a seasonal basis or lets of 364 days or less are not eligible for Rural Priorities.

You should submit this Form when you submit your Outcome Plan.

1. Applicant details

Complete if you are the tenant, sub-tenant, grazing clerk or contractual licensee

Applicant's Name	<input type="text"/>
Main Location Code	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> / <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
Business Reference Number	<input type="text" value=""/>
Rural Priorities Case Number	<input type="text"/>
Business Name <i>(enter name of company or partnership if appropriate)</i>	<input type="text"/>
Correspondence Address <i>(Required if you do not submit a SAF submitted under IACS)</i>	<input type="text"/>
	Postcode <input type="text" value=""/>

2. Enter Landlord/ Principal Tenant's details *(Note 1)*

Landlord/Principal Tenant's Name																					
Main Location Code <i>(Note 2)</i>																					
<p style="text-align: center;">Business Name <i>(enter name of company or partnership if appropriate)</i></p>																					
<p style="text-align: center;">Correspondence Address <i>(Required if you do not submit a SAF submitted under IACS)</i></p>	<p style="text-align: right;">Postcode <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> </tr> </table></p>																				

Note 1 To be completed by the Landlord or on behalf of the Landlord. Provide either the Main Location Code and Business Name or provide the Correspondence Address

Note 2 If the Landlord's Main Location Code is not known or does not exist then the Correspondence Address must be provided



3. Declarations and undertakings to be completed by the Landlord/Principal Tenants

I/we declare that:

- I/we have read and understood the RDC Rural Priorities guidance and the information provided by the Applicant named in page 1 of this form.
- I am/we are the outright owner (or for crofting land the principal tenant) of all/part of the land in this application.
- In the event that the Applicant named in page 1 ceases to have management control over the relevant land (the land over which I/we will undertake management control), I/we will have control over the relevant land for the remainder of the 5 year agreement.

I/we undertake:

- In the event that the Applicant named in page 1 ceases to have control over the relevant land (the land over which I/we will undertake management control) in the application at any time before the completion of the full 5 year term of any agreement resulting from this application.
- I/We will complete and send to RPID a successor application form within 3 months of the cessation of the tenancy/licence.

Landlord/Principal Tenant Signature	Name (BLOCK LETTERS)	Status *																				
Please enter your Agent Identification Number (if submitted by an agent):		Date																				
<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>												<table border="1"> <tr> <td>D</td><td>D</td><td>/</td><td>M</td><td>M</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> </table>	D	D	/	M	M	/	Y	Y	Y	Y
D	D	/	M	M	/	Y	Y	Y	Y													
<p>If you are an agent you must obtain the applicant's authority before the form is submitted. A form (AA1) is available for this purpose and can be obtained from any SGRPID Area Office.</p>																						

* If you are applying for, or on behalf of, a Limited Company (or other corporate body) you must submit with this form one of the following :

- A Board minute or letter from a representative of the Company to verify that the signatory in section 3 above has the authority to sign on behalf of that Company,
- or
- Printed evidence from Companies House website, to verify the signatory has the authority to act on behalf of the Limited Company.