

MINISTRY OF HOUSING AND LANDS

APPLICATION FORM FOR STATE LAND LEASE

Agricultural, Landscaping and Other Purposes

	Application Ref:
PART	(For Office Use)
1.	Name of Applicant (Personal or Company, as applicable):
	Authorised representative of Company:
	Address of representative of Company:
	Address of applicant (Personal or Company, as applicable):
	BRN of Company:
2.	Contact Numbers
	Home : Office:
	Mobile : Facsimile No:
	Email Address :
3.	Extent of State land applied for, supported by a site location plan
4.	Brief description of landscaping proposal / agricultural development proposal

5. Is the applicant owner of a private land or lessee of State land? If so, please give details.

.....

6. Statement of Applicant

I certify / the Company certifies that the above information given is correct and I am / the Company is fully aware that in case any information is proved to be incorrect, my application for the lease of a plot of State land for landscaping will be forthwith rejected and/or any Lease Agreement signed by me / on behalf of the Company will be cancelled without payment of any compensation to me / to the Company and I / the Company may be liable to prosecution.

Signature of applicant

Date

Note: Incomplete, inaccurate and inadequate filling of the form will lead to an outright rejection of the application.

PART B. For official use only

Received / Registered on:(Date)

By.....(Name of Officer)

(Signature)