APPLICATION FOR CROWN LAND

1. NAME:
2. ADDRESS: P.O. BOX:
3. TELEPHONE (Business): HOME:
4. (i) PLACE OF BIRTH (ii) ISLAND (iii) NATIONALITY
5. DATE OF BIRTH (D)/(M)/(Y)
6. OCCUPATION: 6a. N.I.B. #:
7. ACREAGE APPLIED FOR:
8. PURPOSE FOR WHICH LAND IS REQUIRED: (RESIDENTIAL, TOURISTIC, COMMERCIAL, OTHER) (If agriculture, then state your experience, training or previous agricultural work)
9. LOCATION:
10. ISLAND:
11. DETAILS OF LAND DEVELOPMENT:
12. ARE YOU, OR WERE YOU FORMERLY, AN EMPLOYEE OF THE BAHAMAS GOVERNMENT OR A BAHAMAS GOVERNMENT CORPORATION? YES () NO ()
IF YES, GIVE DATES AND POSITION HELD:
12a. ARE YOU A RELATIVE, OR BUSINESS ASSOCIATE, OF A SERVING PUBLIC OFFICER? YES () NO () IF YES, PLEASE STATE THE POSITION OF THE RELATIVE OR ASSOCIATE AND YOUR RELATION TO HIM/HER. POSITION OF RELATIVE/ASSOCIATE:
13. INVESTMENT PROPOSED: (I) LAND PREPARATION \$
(II) BUILDINGS \$ (III) OTHER FACILITIES \$
14. SOURCE OF FINANCE FOR DEVELOPMENT: PRIVATE FUNDS () LOAN () OTHER () PROVIDE VERIFICATION (WITH ATTACHED DOCUMENT(S)) OF YOUR FINANCIAL CAPACITY AND SOURCE OF FUNDS (SAVINGS, CERTIFIED BY BANK RECORD, FAMILY CONTRIBUTIONS CERTIFIED BY FAMILY MEMBERS, PENSION OR GRATUITY BENEFITS, BANK LOAN OR MORTGAGE. IF OTHER, PLEASE EXPLAIN.
15. HAVE YOU BEEN GRANTED OR LEASED CROWN LAND PREVIOUSLY? YES () NO ()
16. IF YES TO #15 STATE LOCATION OF LAND, WHETHER GRANTED OR LEASE AND ACREAGE AND FOR WHAT PURPOSE (RESIDENTIAL, TOURISTIC, COMMERCIAL, OTHER)
17. ARE YOU PRESENTLY IN OCCUPATION OF CROWN LAND? YES () NO ()
18. IF YES TO #17, STATE LOCATION AND WHETHER UNDER A LEASE OR GRANT:
19. TYPE OF TENURE REQUESTED: (Please tick one) CONDITIONAL PURCHASE LEASE () Or RENEWABLE LEASE: 1 YEAR () 5 YEARS () OTHER (State duration) () Or GRANT (freehold) ()
20 ARE YOU PREPARED TO START DEVELOPMENT WITHIN THREE MONTHS OF THE CONTRACT TO LEASE? YES () NO ()
21. I declare that all the statements and information entered above by me are true and correct and I acknowledge that this application does not constitute a permission to enter Crown Land. All items, 1 – 20, must be responded to.
APPLICANT: DATE:
WITNESS: DATE: