## 11. Ownership Certificates and Agricultural Land Declaration

**One Certificate A, B, C, or D, must be completed with this application form**

**CERTIFICATE OF OWNERSHIP - CERTIFICATE A**

**Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14**

I certify/The applicant certifies that on the day 21 days before the date of this application nobody except myself/ the applicant was the owner* of any part of the land or building to which the application relates, and that none of the land to which the application relates is, or is part of, an agricultural holding**

**NOTE: You should sign Certificate B, C or D, as appropriate, if you are the sole owner of the land or building to which the application relates but the land is, or is part of, an agricultural holding.**

** "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run.*
*** "agricultural holding" has the meaning given by reference to the definition of "agricultural tenant" in section 65(8) of the Act.*

| Signed - Applicant: | Or signed - Agent: | Date (DD/MM/YYYY): |
|---|---|---|
| | [redacted] | 22/06/2018 |

**CERTIFICATE OF OWNERSHIP - CERTIFICATE B**

**Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14**

I certify/ The applicant certifies that I have/the applicant has given the requisite notice to everyone else (as listed below) who, on the day 21 days before the date of this application, was the owner* and/or agricultural tenant** of any part of the land or building to which this application relates.

** "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run.*
*** "agricultural tenant" has the meaning given in section 65(8) of the Town and Country Planning Act 1990*

| Name of Owner / Agricultural Tenant | Address | Date Notice Served |
|---|---|---|
| | | |
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| | | |
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| | | |

| Signed - Applicant: | Or signed - Agent: | Date (DD/MM/YYYY): |
|---|---|---|
| | | |