# H:\04. Programmes\Comic Relief_Intermediary Partner_2COM\00_Programme File\0.6_Comms\CR_Logo_Red_RGB.pngPROJECT

# CONSENT

# FORM

Complete all parts of this form if **any aspect** of your Comic Relief Community Fund (England) project involves a **physical** **change to an indoor or outdoor space**.

**SECTION 1 - LANDOWNER/LEASEHOLDER CONSENT**

**Notes for LEASEHOLDERS**

If you lease land and have a lease agreement approved that exceeds three years, your group can sign this form.

I am theLandowner  the Leaseholder

(for the location of the project)(Leaseholders need to have a lease agreement of at least 3 years or more)

**Contact Details:**

|  |  |  |
| --- | --- | --- |
| Title (Mr, Mrs, Ms etc) | |  |
| Full Name | |  |
| Group Name | |  |
| Contact Address | |  |
| Postcode | |  |
| Contact Number | Mobile |  |
| Landline |  |
| Email | |  |

**Multiple Sites (where applicable):**

This project takes place on more than one site.\*

\*Please provide additional Landowner / Leaseholder details for **all** sites in the ‘Additional Information’ box at the end of this form. Include; the Landowner / Leaseholder’s Full Name(s), Contact Address(es), Contact Number(s) and email address(es). You will also need to ensure that each Landowner has been consulted on points 1 and 2 of Section 2.

**SECTION 2 - SIGNATURE**

|  |  |
| --- | --- |
| Project Name |  |
| Organisation Name |  |

All four boxes must be ticked.

1. I confirm that the Landowner / Leaseholder has read the project proposals and is happy with them.
2. I confirm that I have considered whether any permissions are required (eg. Planning Permission, project permissions (e.g trips), Environmental Agency, English Heritage) and will adhere to any conditions attached.
3. I confirm that any required insurances (eg. public, employer liability) are in place for the project to go ahead.
4. I confirm that any relevant legislation (eg. Health and Safety, Equal Opportunities, Child Protection) will be adhered to.

|  |  |
| --- | --- |
| Signed  (this can be typed in) |  |
| Print Name |  |
| Date |  |

Additional Information (If there is anything else you wish us to be aware of please note it below. If applicable, also provide additional Landowner / Leaseholder details):-

|  |
| --- |
|  |