Form F: Consent form

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| Consent Formto support an application to withhold information under the Land Transfer Act 2017 |
| I *(Enter the full name of the person giving consent)* |
|  |
| Consent to the withholding of information in the register referred to in the application of the Applicant: *(Enter the full name of the Applicant)* |
|  |
| My relationship to the Applicant is: *(delete those not applicable)* |
| I co-own the property with the Applicant, orI own the property where the Applicant resides, orOther: *(please specify)*  |
| My contact details are:  |
| Address:Phone:Email:  |
| Dated DD MM YYYY |
|  | Signed in my presence by the person giving consent |
|  |  |  |  |
|  | Signature of witness |
|  |  |
|  | *Witness to complete in BLOCK letters (unless legibly printed)* |
|  | Witness name: |
|  | Occupation: |
|  | Address: |
| Signature of person giving consent |  |
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