

Agent Authority Form

Use this form to provide your agent or representative with authority to act on your behalf when dealing with the Forestry Commission. This form should also be used to change existing agent authority.

Agreement/Case Reference (if applicable):

Part A: To be completed by the agent / representative

Name:
 Company:
 Address:

 County: Postcode:
 Telephone no: Mobile no:
 Email:
 Signature of agent / representative:

 Print name:
 Date:

Part B: Agent / Representative Authority

I authorise the person named in part A to act on my behalf until further notice and carry out the following (please tick those that are appropriate):

- Sign grant contracts Sign Felling Licence conditions
- Agree amendments to grant contracts
- Agree changes to payee details
- Claim grants

Part C: Permission

This permission applies to:

- Only the agreement quoted above
- All my FC applications
- The agreement quoted above and the following other agreements:

.....

Client Authorisation

Signature:

 Print Name: Date:

SBI:

--	--	--	--	--	--	--	--	--

For FC Use Only (V2.2)

Date records received:
 Date records updated:

****PLEASE ENSURE THAT A COPY OF THIS FORM IS ATTACHED TO ALL FILES AND UPLOADED TO GLOS WHERE AN AGENT HAS THE AUTHORITY TO ACT ON AN APPLICANT'S BEHALF****