

Woodland Grant Scheme – Farm Woodland Premium Scheme

Application

Your application should be submitted at least 3 months before you want your agreement to start. When completed, forms should be sent to your local FC Conservancy office, together with any necessary supporting documents. If you are applying for FWPS, please note that we will check your application details against your IACS record.

Use separate sheets, if required and securely attach to this form remembering to indicate the question to which the information relates on each sheet.

It is essential that you read pages 6 to 10 of the Guidance Notes as you complete this form.

1 The property

Woodland or property name:

Nearest town, village or locality:

Use of property:

OS grid reference:

Local authority:

2 Applicant's details

Title (Mr/Mrs/Ms/etc):

Initials:

Surname:

Organisation:

Position:

Address:

Postcode:

Tel:

Fax:

E-mail:

This address for correspondence?

Yes

No

Owner No. (for FC use)

3 Any other applicant's details

Title (Mr/Mrs/Ms/etc):

Initials:

Surname:

Organisation:

Position:

Address:

Postcode:

Tel:

Fax:

E-mail:

This address for correspondence?

Yes

No

On a separate sheet, give the names and addresses of any other joint owners or trustees.

Owner No. (for FC use)

Sections 7, 8, 9, 10 and 11 must be completed by FWPS applicants

If you are planning to plant new woodland on any IACS registered land, please use a planting map that shows the IACS field boundaries and parcel numbers. You should complete Form IACS 22 (available from your local Rural Payments Agency (RPA) office) if you intend to plant trees on land not previously IACS registered.

7 Agricultural Holding details

Applicant's name

Title (Mr/Mrs/Ms/etc): _____ Initials: _____ Surname: _____

Position: _____

*Business name of applicant. Ensure that the business name corresponds to the name of your business bank account. If you have appointed an **agent** to act for you, **your** business name should still be given.*

Business name: _____

Address to which correspondence should be sent. If an agent's address is to be used for correspondence, the address below should begin "c/o (agent's name)..."

Business address: _____

Postcode: _____

Tel: _____ Fax: _____ E-mail: _____

What is the Main Holding Number of the land to which this application refers? _____

8 Land category

Abbreviation	Name or number of Management Units affected	Area affected
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

9 Other FWPS areas

Farm or Agricultural Holding number	Area
_____ / _____	_____
_____ / _____	_____
_____ / _____	_____
_____ / _____	_____
_____ / _____	_____
_____ / _____	_____
_____ / _____	_____

10 Land resumption and landlord's consent

1 If you are the 'Owner-occupier' or landlord of the land to be converted, has the land been resumed from a tenant by means of a contested notice to quit or is it currently the subject of such action? Yes No

2 If you are applying for the FWPS on land which you occupy as a tenant you will need to obtain your landlord's consent to join the scheme.

Would you like us to send you a Landlord's Consent Form? Yes No

11 Common Land

I confirm that none of the area to be planted is Common Land. (Common land is ineligible for FWPS) Please tick

12 Other grants and Felling Licences

a Forestry Commission (give reference numbers, including those adjacent to or directly affecting this application):

b Agricultural or horticultural capital grants (give Defra reference number, date of grant payment or plan approval and name of issuing office):

c Other grants:

13 Your objectives

Only tick those which apply to YOUR application – some may be left blank. Numbers are for FC use only.

	PRIORITY		
	HIGH	MEDIUM	LOW
1. Producing wood and marketable timber	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Managing or regenerating forests or woodlands	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Enhancing the landscape	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Maintaining and creating new wildlife habitats	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Providing public recreation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Providing sporting use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Providing employment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Providing an alternative to agricultural production	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Restoring or improving industrial or derelict land	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Providing shelter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Conserving archaeological features	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Please specify others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Declaration and signature

I/we have read and understood the WGS/FWPS guidance literature;

The answers given in this application and any associated maps are correct and I/we accept full responsibility for them;

I/we are not applying for any assistance towards any work that I/we have a legal or established responsibility to complete;

I/we have a sufficient legal interest in any land to which the application relates to enter a commitment under the Scheme(s) applied for.

Data Protection Act

I/We agree to any disclosure and exchange of information about my/our participation in the Scheme(s) with other organisations or consultants which the Forestry Commission or Defra considers necessary for the administration, monitoring, evaluation and publicising of the Scheme(s) concerned. Details may also be passed to successors in title to the land.

Environmental Impact Assessment Regulations

I/we note that the Forestry Commission will consider this Woodland Grant Scheme (WGS) application as an application for our Opinion (if this has not already been given) under Regulation 5 of the Environmental Impact Assessment (Forestry) (England and Wales) Regulations 1999.

Signature (owner or authorised agent):

Date:

Signature (owner or authorised agent):

Date:

Defra or its appointed agents may contact you in connection with occasional customer research aimed at improving the services that Defra provides to you.

Now complete your Proposals WGS–FWPS 2 form