



Countryside Stewardship Land Ownership and Control form

Use this form if you are applying for Countryside Stewardship (CS) and you do not have management control over part or all of the land included in your application for the entire duration of any agreement (and any durability requirement).

You must get the written consent of all other parties who have management control of the land, and they will need to countersign your application. You must complete a separate form for each countersignatory.

You can authorise an agent to fill in and submit this form for you. You must give them the appropriate permission levels in the Rural Payments service to do this.

How to fill in this form

You, or an authorised agent must complete Part 1 and read and sign the Declaration in Part 3.

Your countersignatory must complete Part 2, and read and sign the Declarations and Undertakings in Part 2, Section 4.

- Please use black ink and write in capital letters (do not use pencil or felt-tip pen).
- Do not cross through whole pages or remove pages.
- Correct mistakes and initial and date them (do not use correction fluid).
- Completely fill any checkbox containing a mistake and put an 'X' or a tick in the correct box.
- Before you submit your application, make sure that you:
 - have filled in all parts of the form and answered all questions that apply to you
 - attach all supporting documents
 - have the appropriate permissions in the Rural Payments service

Returning your form

Send your completed form to the Rural Payments Agency (RPA) ruralpayments@defra.gov.uk or post to Rural Payments Agency, PO Box 324, Worksop, S95 1DF and keep a copy for your records.

For Rural Payments Agency use only

Date Stamp

Office Location

Agreement reference

Form Type

CS

Form Reference

CSLOCF

Part 1 – Applicant/Agreement Holder details

1 Applicant/Agreement Holder details

- a) Application/Agreement reference number (where available only)
- b) Single Business Identifier
- c) Business name
- d) Applicant/Agreement holder name(s)

Title (Mr/Mrs)	Forename(s)	Surname

- e) Main correspondence address

Town

County

Postcode

- f) Landline telephone number
- g) Mobile telephone number
- h) Email address

- i) Please tick to indicate your preferred method of contact
- | | | | | |
|--|----------|--------|-------|--------|
| | Landline | Mobile | Email | Letter |
|--|----------|--------|-------|--------|

2

- a) Are you an agent (or partnership representative acting as an agent) completing and submitting this form on behalf of others?

Yes	No
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If **'No'**, go to Part 2.

If **'Yes'**, please complete Question 2 (b) below.

- b) Have appropriate permissions been set for you in Rural Payments service so that you are authorised to act on behalf of the applicant?

Yes	No
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If **'Yes'**, go to part 2.

If **'No'**, you and the individual(s), on who's behalf you are applying must update your details in the Rural Payments service.

Read the guidance on how to [give someone else permission to act on your behalf](#) for more information about the different levels of permission. This applies even if you have previously authorised the agent using the paper agent authorisation form.

Part 2 – Details of countersigning applicant

Section 1: Applicant(s) tenancy details

3 Please complete the details of the tenancy held by the applicant(s) named in Part 1.

- a) Start/end date of tenancy _____ to _____
b) CPH number of tenanted land _____ / _____ / _____

Section 2: Countersignatory's details

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a) Name

Title (Mr/Mrs)	Forename(s)	Surname

b) Business name

c) Main correspondence address

Town

County

Postcode

d) Landline telephone number

e) Mobile telephone number

f) Email address

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a) Are you an agent (or partnership representative acting as an agent) completing and submitting this application on behalf of the countersignatory? Yes No

If **'No'**, go to Part 2, Section 3.

If **'Yes'**, please complete Question 5 (b) below.

b) If **'Yes'**, do you have the correct permission levels in Rural Payments service to act for the countersignatory? Yes No

If **'No'**, you and the individual(s), on who's behalf you are applying must update your details in the Rural Payments service.

Read the guidance on how to [give someone else permission to act on your behalf](#) for more information about the different levels of permission. This applies even if you have previously authorised the agent using the paper agent authorisation form.

Part 2 – Details of countersigning applicant continued

Section 3: Countersignatory’s land

6 a) Are you a tenant? Yes No

If ‘No’, go to Question 7. If ‘Yes’, please complete Question 6 (b)

b) Do you have any obligations in your tenancy to carry out environmental management on the land in this application? Yes No

If ‘No’, go to Question 7. If ‘Yes’, please complete Question 6 (c)

c) Please tick to confirm that the applicant is not seeking funding for these activities in the application that this form relates to. Yes

7 Are you countersigning for **all** of the land being included in the application that this form relates to? Yes No

If ‘Yes’, go to Section 4. If ‘No’, enter details of the land parcels that will be covered by the declarations and undertakings in Section 4 in the table below:

OS Map sheet ref/ National Grid no.	OS Map sheet ref/ National Grid no.	OS Map sheet ref/ National Grid no.	OS Map sheet ref/ National Grid no.	OS Map sheet ref/ National Grid no.

If necessary, please continue on an additional sheet and indicate in the box how many have been attached.

Section 4: Countersignatory’s declarations, undertakings and signature

Countersignatory’s declarations

In countersigning this Countryside Stewardship application I confirm that:

- I am over 18 years of age.
- I have read and understood the relevant version of the Countryside Stewardship guide.
- I have read and understood the application to which this form relates, being made by the applicant(s) named in Part 1.

Tick the box(es) that apply:

I am the freehold owner of the land declared in Part 2, Section 3.

I am the tenant of the land declared in Part 2, Section 3 and I have a secure tenancy which covers the duration of any agreement (and any durability requirement) that may result from this application.

- In the event that the applicant(s) named in Part 1 ceases to have management control over the land declared in Part 2, Section 3 during the term of any agreement (and any durability requirement) resulting from this application, I will have management control over such land for the remainder of such agreement (and any durability requirement).

Part 2 – Details of countersigning applicant continued

Section 4: Countersignatory declarations, undertakings and signature continued

Countersignatory undertakings

In countersigning this Countryside Stewardship application I confirm that:

I undertake that if the applicant(s) named in Part 1 ceases to have management control over the land declared in Part 2, Section 3 at any time before the completion of the full term of any agreement (and any durability requirement) resulting from this application, including, but not limited to, where I/we terminate the applicant's possessory interest in or control over the relevant land, I will from the date of such cessation ensure that all of the obligations under the agreement will be properly fulfilled for the full term of such agreement (and any durability requirement).

Where I have failed to fulfil the obligations identified in the previous paragraph (such as non-compliance with the agreement) or where the Rural Payments Agency reasonably believes that false or misleading information has been given by me in this application form or in subsequent correspondence relating to this scheme, the agreement may be terminated by the Rural Payments Agency, and I agree to repay on demand, any payments received by me or the applicant(s) under the agreement.

In addition, I undertake to:

- allow access to any land and any relevant records to which the application relates for the carrying out of site visits or audit in order to verify the accuracy of any information provided to the Rural Payments Agency and to ensure compliance with these undertakings;
- provide any additional information as may be required by the Rural Payments Agency or field officers or auditors and co-operate with or take part in any economic environmental or other monitoring and evaluation of the scheme (including any research and development studies) conducted by the Rural Payments Agency or their appointees for that purpose.

This declaration and undertaking must be signed by a party/parties having full capacity and authority to bind the countersignatory named at Part 2 of this form or by an agent who has permission from the countersignatory.

Signature	Name (BLOCK letters)	Capacity of countersignatory (example landlord)	Date

If you knowingly or recklessly make a false statement to obtain funding for yourself or anyone else, you risk prosecution (which could result in imprisonment, a fine or both), the loss of all funding paid to you under other Defra grant scheme(s) in respect of which you have made a commitment, and exclusion from other Defra grant schemes for up to two years.

Part 3 – Applicant(s) declaration

I/We declare that:

- The information given in this form is to the best of my/our knowledge correct and I/we accept full responsibility for it

This declaration and undertaking must be signed by a party/parties having full capacity and authority to bind the countersignatory named at Part 2 of this form or by an agent who has permission from the countersignatory.

Signature	Name (BLOCK letters)	Capacity of countersignatory (example: landlord)	Date

Warning

If you knowingly or recklessly make a false statement to obtain funding for yourself or anyone else, you risk prosecution (which could result in imprisonment, a fine or both), the loss of all funding paid to you under other Defra grant scheme(s) in respect of which you have made a commitment, and exclusion from other Defra grant schemes for up to two years.

Using and sharing your information

For information on how we handle personal data go to www.gov.uk and search [Rural Payments Agency personal information charter](#).