

Crown land: Application for ministerial consent to transfer a crown holding

Use this form to seek the Ministers consent to transfer land comprised in a Crown holding by way of sale, sublease or mortgage.

Contact us

For more information, please contact us at:

NSW Department of Planning, Industry & Environment—Crown Lands
PO Box 2155
DANGAR NSW 2309

Phone: 1300 886 235

Fax: 02 4925 3517

Email: accounts@crowland.nsw.gov.au

Web: industry.nsw.gov.au/lands

Fee

\$308.00

For further information, refer to the NSW Department of Planning, Industry & Environment—Crown Lands website (industry.nsw.gov.au/lands).

Lodgement

Email the completed form to: accounts@crowland.nsw.gov.au

or

Mail to:

NSW Department of Planning, Industry & Environment—Crown Lands
PO Box 2155
DANGAR NSW 2309

Include fee payment - Cheque or Money Order payable to the Department of Planning, Industry & Environment—Crown Lands

Application type

Applicant is	<input type="checkbox"/> a company*	<input type="checkbox"/> individual(s)
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*If applicant is a company, a current company search with details of the directors is to be lodged with this application.

Applicant details—proposed transferee

(A section for additional applicants is attached at the end of this form)

Salutation	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Dr <input type="checkbox"/> Other:				
First Name			Surname		
Company / Business name					
ABN/ACN					
Home address					
Postal address					
Email address					
Work telephone		Home		Mobile	

<input type="checkbox"/> I/ <input type="checkbox"/> we	apply for consent to the transfer of the land specified in the schedule hereunder to me/us by way of
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<input type="checkbox"/> Mortgage <input type="checkbox"/> Sale <input type="checkbox"/> Sublease <input type="checkbox"/> Other (please specify)	Description:
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Transferor/s details

Salutation	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Dr <input type="checkbox"/> Other:				
First Name			Surname		
Company / Business name					
ABN/ACN					
Home address					
Postal address					
Email address					
Work telephone		Home		Mobile	

Description of land to be transferred

Crown Lease number		Lot / DP	
Registered Lease			
Area		Locality	

Declaration of Transferee

<input type="checkbox"/> I / <input type="checkbox"/> We		confirm:
<ul style="list-style-type: none"> I am/we are 18 years of age <input type="checkbox"/> or I am/we are not 18 years of age <input type="checkbox"/> (tick appropriate) I am/we are the proposed transferee/s of the land shown in the schedule my/our sole object in acquiring the land is in order that I/we may hold it for exclusive benefit for the purpose of: 		

The land is currently used for the purpose of:

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(attach photographs if the lease is being used for a purpose other than grazing)

NOTE: If the proposed transferee is a company this form should be amended accordingly

Signature of proposed transferee/s		Date	
Signature of proposed transferee/s		Date	

Declaration of witness

I declare this declaration was made before me at					
This		Day of		20	
Name					
Signature				Date	

Declaration of Transferor

<input type="checkbox"/> I / <input type="checkbox"/> We		confirm:
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- I am/we are 18 year of age or I am/we are not 18 years of age (tick appropriate)
- I am/we are the proposed transferor/s of the land shown in the schedule.

NOTE: If the proposed transferor is a company this form should be amended accordingly

Signature of proposed transferor/s		Date	
Signature of proposed transferor/s		Date	

Declaration of witness

I declare this declaration was made before me at					
This		Day of		20	
Name					
Signature				Date	

Supporting documentation checklist

- Include a current company/business search with details of the directors (for company applications only)

Office use only – Refer to the Receipting and Referrals Codes Document						
<input type="checkbox"/> DO	Referral Code	DO	Receipting Code	TEN/MC/TFER	CM9	
Fee Paid		Receipt Number		Account number		
Date						

© State of New South Wales through Department of Planning, Industry & Environment 2021. The information contained in this publication is based on knowledge and understanding at the time of writing (June 2021). However, because of advances in knowledge, users are reminded of the need to ensure that the information upon which they rely is up to date and to check the currency of the information with the appropriate officer of the Department of Planning, Industry & Environment or the user's independent adviser.