WARNING: Providing false information to Government is an offence under the False Information Act 2016. If you are found guilty of providing false information to Government, you may be fined up to \$20,000 or sentenced to imprisonment for up to 10 years.

APPLICATION FORM FOR SURVEY REGULARISATION OF LEASES PROGRAMME

SECTION A: DETAILS OF APPLICANT						
Full Name:						
Residential Address:						
District/Town:		Province:				
Phone No.:		Mobile No.:				
Current Occupation:		Full-time, Part-time or Casual:				
Name of Employer (if applicable):					
FNPF No.:		Taxpayer Identification No.:				
SECTION B: IDENTIFICATION (VOTER IDENTIFICATION CARD PREFERRED)						
□ Voter Identification Card No.: □ □ □ □ □ □ □ □ □ □ □ □ □						
☐ Other valid photo identification (please specify):						
SECTION C: LAND DETAILS						
You hold (select one):						
☐ an Approval Notice of lease for State Land ☐ an Agreement for Lease for iTaukei Land						
Lease Reference No.:	Lot No.:		Plan No.:			
Land Description/Name:	Area:					
SECTION D: HOUSEHOLD DE	TAILS					
List of income earners in housel	nold and annual i	income (gross):				
Income Earner Taxpayer Ider (if any)		ntification No.	Annual income (if any) (before tax and FNPF deductions)			

SECTION E: ADDITIONAL DOCUME	ENTS					
Attached to this application form are:						
salary slips, if applicable;						
☐ birth certificate;						
□ valid photo identification;						
 □ taxpayer identification number (TIN) letter; and □ quotations from <u>3</u> registered land surveyors in relation to the survey of the land referred to in 						
	and surveyors ii	n relation to the surve	ey of the land referred to in			
Section C. SECTION F: DECLARATION						
By ticking this box \square , I declare that:						
a) I am a Fijian citizen residing in Fiji; b) I am 18 years of age or above;						
c) the gross annual combined income of my household (persons living in the same house) is \$50,000						
or less;						
(d) I hold either an Approval Notice for State Land or Agreement for Lease for iTaukei Land for						
'residential purpose' under my name; (a) attached to this application form are original or true, correct and cartified copies of the documents.						
(e) attached to this application form are original or true, correct and certified copies of the documents required to be attached under Section E;						
(f) I have not previously received ass		e Programme; and				
(g) I understand that the provision of false information to Government for the purposes of receiving a						
benefit is an offence under the False Information Act 2016 and may result in a requirement to						
repay the benefit, a fine of up to \$20,000 or an imprisonment term of up to 10 years or any or all of the foregoing.						
SECTION G: SIGNATURE						
I, (full name),						
of (address),						
solemnly and sincerely declare that the information contained in this form is true and correct and I						
make this solemn declaration believing the same to be true.						
(
(signature)						
Declared at	this	day of	201 .			
(signature of witness)						
Name:						
Occupation:						
Address:						
SECTION H: OFFICIAL USE - LEGA	AL AID COMMIS	SION				
Office:						
Receiving officer:						
Signature:						
Signature: Date: Application number:						