

ASSETS OF COMMUNITY VALUE NOMINATION FORM

Please read the accompanying guidance notes before completing this form.

Submit your completed form:

- By post to: Policy Team, 3E/02, Civic Centre, Uxbridge, Middx, UB8
- By email to: jwheatley@hillingdon.gov.uk

| PART 1: ABOUT YOU | | | | |
|------------------------------------------------------------------------|----|--|--|--|
| Title | | | | |
| First Name | | | | |
| Surname | | | | |
| Address | | | | |
| Postcode | | | | |
| Telephone Number | | | | |
| Email Address | | | | |
| Your position in the | | | | |
| organisation | | | | |
| Please state if you are acting as representative | | | | |
| for the organisation | | | | |
| PART 2: ABOUT YOUR ORGANISATION | | | | |
| Name of organisation | | | | |
| Address (if different | | | | |
| from Part 1 above) | | | | |
| Postcode | | | | |
| Please indicate which type of eligible organisation you represent (see | | | | |
| guidance) | | | | |
| Charity | | | | |
| Company Limited by Guarantee | | | | |
| Industrial and Provident Society | | | | |
| Community Interest Company | | | | |
| Unincorporated Body | | | | |
| Neighbourhood Forum | | | | |
| PART 3: LOCAL CONNECTI | ON | | | |
| Please outline your local conn the asset you wish to nomina guidance). | | | | |
| | | | | |

| PART 4: ABOUT THE ASSET | |
|-----------------------------------------|--|
| Name of Asset | |
| | |
| | |
| Full Address including | |
| postcode/Location of Asset | |
| | |
| Description of asset and its boundaries | |
| | |
| | |
| Current or recent main use of the land | |
| and/or buildings | |
| | |
| Names and addresses of all known | |
| owners of the asset | |
| Current occupier/s | |
| | |
| | |
| Reasons for nomination | |
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Please attach any relevant Land Registry documents, maps, plans, photos and any other documents relevant to your application for nomination.

| PART 5: DECLARATION | | |
|-----------------------------------------------------------------------|--|--|
| I confirm that all the information provided is accurate and complete: | | |
| Name: | | |
| | | |
| Signature: | | |
| | | |
| Date: | | |
| | | |