

COMMONWEALTH OF MASSACHUSETTS DEPARTMENT OF CONSERVATION AND RECREATION



MASSTRAILS GRANT PROGRAM

PUBLIC LANDOWNER PERMISSION FORM

Instructions: This form must be signed and submitted with the MassTrails Grant Application online. Every project is required to submit a landowner permission form with the grant application, including projects where the applicant is the landowner. See the MassTrails Grant Guidelines for further instructions. This form must be completed separately for each MassTrails application and cannot be reused over multiple years. If the project involves work on multiple parcels of land with different landowners, a separate landowner permission form must be submitted for each unique landowner.

For the purpose of receiving MassTrails funding, any and all projects funded by MassTrails on public property must have prior written approval by the landowner / manager before any work is initiated. This form can be used for federal, state, county, and municipal properties. This form is not valid for private land. Grant approval by MassTrails <u>DOES NOT</u> constitute consent by a landowner or land manager for any work to commence.

Grant Applicant / Organization:

Project Name:

Project Manager / Contact:

Date:

List the property landowner where the proposed MassTrails Grant project will take place (e.g., municipal park name, DCR property name, land trust property name).

Name of Public Land:

Contact Person for Public Land / Land Manager:

Title of Contact Person for Public Land / Land Manager:

Best Means of Contact:

(Please list an email address, phone number, mobile number, or mailing address)

I certify that the Grant Applicant / Organization has informed me, as an/the authorized land manager, of the project scope for the above named project. Consent is hereby given from the land manager for the work to take place on the above named public property.

Signature (Land Manager):

Date:

The Landowner Permission Form is not valid unless fully completed with all signatures and dates.