



APPLICATION FOR REVIEW OF APPORTIONMENT OF COMMON GRAZING

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THIS APPLICATION CAN BE USED BY A CROFTER WITH AN APPORTIONMENT OR GRAZING COMMITTEE OR OWNER OF THE GRAZINGS TO SEEK A REVIEW OF AN APPORTIONMENT

CROFTER, GRAZINGS COMMITTEE, OWNER OF GRAZINGS

ALL FIELDS MUST BE COMPLETED

1 Applicant Details

Surname:		Title:
Forename(s):		
Main Residential Address:		
		Postcode:
Telephone:		
Alternative Telephone:		
E-mail Address:		
I agree to communication regarding this application by e-mail		Yes <input type="checkbox"/> No <input type="checkbox"/>

2 Agent Details for applicant (only if applicable)

Name:			
Postal Address:			
		Postcode:	
Telephone:			
Alternative Telephone:			
E-mail Address:			
I agree to communication regarding this application by e-mail		Yes <input type="checkbox"/>	No <input type="checkbox"/>

3 Croft Details

Croft:			
Parish:			
Crofting Commission Register Number			
Registers of Scotland Register Number (where registered):		Main Location Code: (MLC)	

4 Additional Croft Details (only required if application is in respect of more than one croft)

Croft:			
Parish:			
Crofting Commission Register Number			
Registers of Scotland Register Number (where registered):		Main Location Code: (MLC)	

5 Grazing Clerk/Constable Details

Name:		
Postal Address:		
		Postcode:
Telephone:		
Alternative Telephone:		
E-mail Address:		
I agree to communication regarding this application by e-mail		Yes <input type="checkbox"/> No <input type="checkbox"/>

6 Landlord Details (additional landlord/owner of common grazings details can be entered on Appendix 1)

Name of Organisation/Company/Estate:		
Surname:		Title:
Forename(s):		
Postal Address:		
		Postcode:
Telephone:		
Alternative Telephone:		
E-mail Address:		

7 Agent Details for Landlord (only if applicable) – additional agent details can be entered on Appendix 1

Name:		
Postal Address:		
		Postcode:
Telephone:		
Alternative Telephone:		
E-mail Address:		

APPLICANT/AGENT PLEASE SIGN THIS DECLARATION

11 I confirm that I have enclosed the following in connection with this application:

I have included a copy of the Order and Map

12 Declaration

**This application is submitted under section 52(12) of the
Crofters (Scotland) Act 1993**

**I declare that, to the best of my knowledge, the information I have given in this
application is correct.**

Signed _____
Applicant/Agent

Date _____

Signed _____
Applicant/Agent

Date _____

What Happens Next?

- When we receive this application, we will send the applicant or their agent an acknowledgement letter.
- On reviewing an apportionment, the Commission may vary or revoke any condition imposed, impose a new condition or bring the apportionment to an end.
- Our decision can be appealed to the Scottish Land Court within 42 days from the date we notify interested parties of our decision.

Additional Landlord/Owner of Common Grazings Details

Name of Organisation/Company/Estate:	
Surname:	Title:
Forename(s):	
Postal Address:	
	Postcode:
Telephone:	
Alternative Telephone:	
E-mail Address:	

Additional Agent Details for Landlord (only if applicable)

Name:	
Postal Address:	
	Postcode:
Telephone:	
E-mail Address:	

Additional Landlord/Owner of Common Grazings Details

Name of Organisation/Company/Estate:	
Surname:	Title:
Forename(s):	
Date of Birth:	
Postal Address:	
	Postcode:
Telephone:	
Alternative Telephone:	
E-mail Address:	

Additional Agent Details for Landlord (only if applicable)

Name:	
Postal Address:	
	Postcode:
Telephone:	
E-mail Address:	