



**INDIVIDUAL APPLICATION FORM FOR TITLE (GOVERNEMENT/STATE LANDS)  
TO THE COMMISSIONER GUYANA LANDS AND SURVEYS COMMISSION**

**SECTION I**

**DETAILS OF APPLICANT(s)** (Include attachment if more than two (2) Persons are applying)

**Applicant # one (1)**

**Applicant # two (2) (if applicable)**

Last Name	First Name	Last Name	First Name
Date of Birth	Tel/Cell #	Date of Birth	Tel/Cell #
Email Address	Gender M <input type="checkbox"/> F <input type="checkbox"/>	Email Address	Gender M <input type="checkbox"/> F <input type="checkbox"/>
Address:	Photograph	Address:	Photograph
National Identification #	TIN	National Identification #	TIN

**SECTION II**

**PARTICULARS OF LEASE**

Terms of Lease requested <input type="text"/> Years	Existing Title <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes state Title No. <input type="text"/> (Tick the appropriate box)
Class of land <input type="checkbox"/> State <input type="checkbox"/> Gov't	Title Renewal <input type="checkbox"/> Yes <input type="checkbox"/> No	(Tick the appropriate box (es))
Purpose of Lease <input type="checkbox"/> Agricultural <input type="checkbox"/> Grazing <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Recreational <input type="checkbox"/> Ecclesiastical	<input type="text"/>	
Tick the appropriate box (es) OR otherwise state		
Type of Tenancy (For Joint application only) <input type="checkbox"/> Tenancy in Common <input type="checkbox"/> Joint Tenancy	Existing Title Type If any <input type="checkbox"/> Lease <input type="checkbox"/> Licence <input type="checkbox"/> Grant <input type="checkbox"/> Permission <input type="checkbox"/> Provisional Lease	
(Seek assistance from (GLSC) staff to complete this Section)		
Title Type applied For <input type="checkbox"/> Lease <input type="checkbox"/> Licence		

**SECTION III**

**DESCRIPTION OF LAND**

(Fill Part (A) for all surveyed land and Part (B) otherwise. Seek assistance from (GL&SC) Staff to complete this section)  
(Include attachment if you wish to apply for more than two (2) parcels)

**Part (A)**

No	Parcel ID (Relate)	Lot No.	Section (of Locality)	Direction (Of Section)	Sub Lot	Lot Type (For Black Bush only)	Region No.	PCU No.	Location	Acres	Stock Sheet	Plan No.
1.												
2.												

**Part (B)**

Description of Land:

\$	\$	DD/MM/YYYY	\$	\$	No.
Inspection Fee	Filing Fee	Filing Date	Processing Fee	Total	Receipt No.

Please continue this application overleaf.

**Note: Incomplete, inaccurate and inadequate filling of this application may lead to an outright rejection of the Application. If the applicant is unclear in the completion of this Form, please seek the assistance of the Commission's Staff to complete same.**

**I/WE, THE UNDERSIGNED APPLICANT(S) HEREBY DECLARE THAT I/We CLEARLY UNDERSTAND AND ACCEPT THAT IN THE EVENT OF ANY PORTION OF LAND BEING ALLOCATED TO ME/US UNDER ANY AGREEMENT WITH THE GOVERNMENT OF GUYANA SHALL BE A CONDITION OF SUCH AGREEMENT AND THAT THE GOVERNMENT RESERVES THE RIGHT TO EJECT ME FROM SUCH LAND IF ANY OF THE STATEMENT MADE IN THIS FORM IS FOUND TO BE FALSE**

\_\_\_\_\_  
Signature of Applicant (1)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant (2)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Senior Land Administration  
Officer

\_\_\_\_\_  
Date

**Please note that a location sketch showing the area applied for must be included.  
LOCATION SKETCH.**

# Applicant's Details

In this section, the Applicant is required to answer all questions applicable and tick the appropriate box(es)

**Note:** inaccurate and inadequate filling of this Questionnaire may lead to an outright rejection of the Application. If the applicant is unclear in the completion this section, please seek the assistance of GL&SC Staff to complete same.

## Section A

I hereby apply for land situated at \_\_\_\_\_

Name of applicant \_\_\_\_\_

List other name(s) used \_\_\_\_\_

Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

## Section B

In this section Applicant(s) are required to list all persons living and dependent on you who will benefit from the allocation of land.

NO	Names	Relationship	AGE

## Section C

In this section applicant (s) are required to provide details of their means of income and employment status.

- Place of employment \_\_\_\_\_
- How employed/Designation \_\_\_\_\_
- How long have you been employed in that position? \_\_\_\_\_
- What is your average monthly disposable income? \_\_\_\_\_
- Number of days employed each week \_\_\_\_\_
- Please state if you have any other means of income Yes  No   
If YES please provide details of that source income?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Section D

Complete this section if you are applying for residential purposes

- Do you own a house? Yes  No   
If YES, please state the estimated current market value? \_\_\_\_\_
- Where is the house situated?  
\_\_\_\_\_
- Please state the following:-

Land owned (including House Lot)			
Land Being Rented (Including House Lot)			

- Are you prepared to construct a house without Government's assistance? Yes  No

5. If granted a lease by the Government of Guyana, how soon would you be able to commence occupation of the land being applied for? \_\_\_\_\_
6. By what means would you finance your proposed undertaking? \_\_\_\_\_

### Section E

Applicant are only required to complete this section if their applying for agricultural and/ grazing land

1. Are you the owner of any land ( State or Government) that falls under the preview of the Guyana Lands and Surveys Commission?      Yes  No
2. If your above answer is YES please state by what means you are in occupation? (e.g. Lease, Grant, License), location, and amount? \_\_\_\_\_  
\_\_\_\_\_
3. How much land do you think you can cultivate?
4. How much years of experience do you have as a farmer, And what did you cultivate/or rear?  
\_\_\_\_\_  
\_\_\_\_\_
5. Please state if you have conducted a feasibility study for the intended project, if so please provide details.  
\_\_\_\_\_  
\_\_\_\_\_
6. What is your intended method of financing the intended agricultural project?  
\_\_\_\_\_
7. Do you need Government assistance for the intended activity, if so please state in what way(s)?  
.....  
\_\_\_\_\_
8. Give details of livestock you currently own?  
\_\_\_\_\_
9. How many persons will you employ? \_\_\_\_\_
10. How many acres do you think you can farm? \_\_\_\_\_
11. What crops and/ livestock do you intend to cultivate and/or rear? \_\_\_\_\_  
\_\_\_\_\_
12. Have you requested land in any other area, is so what area? \_\_\_\_\_
13. Are you willing to sign a document a part of which requires you to abide with all the conditions laid down by government with regards to the land allocated to you? Yes  No
14. Are you willing to produce a certificate from a Doctor attesting to your physical condition, if requested?  
Yes  No
15. Do you own any cattle? If YES please state type and amount (head count)  
\_\_\_\_\_

I the undersigned hereby certify that each and every statement and or item of information made or given by me and contained herein this application for land, which was given by me are true and correct to the best of my knowlegde in the completion of this application. And I am also fully aware that should the information or any statement (s) made in this application by me is found to be false, the Government of Guyana reserves the right to eject me or my employee/ assignee from such land described in the application or title.

Signature (1) \_\_\_\_\_ Date \_\_\_\_\_

Signature (2) \_\_\_\_\_ Date \_\_\_\_\_

Witnesses (1) \_\_\_\_\_ (2) \_\_\_\_\_

SLAO's COMMENTS:

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DATE \_\_\_\_\_

SIGNATURE:.....

**AFFIDAVIT**

I.....

Of .....  
do solemnly and sincerely declare as follows :-

That each and every statement and/ or item of information made or given by me and contained in this application for land situated at

.....  
.....

dated ..... given under my signature/mark and

witnessed by ..... and ..... is true and correct.

I make this declaration conscientiously believing the same to be true and according to the Statutory Declarations Act, Chapter 5:09.

.....  
**Declarant**

Declared before me this ..... day of ..... 20 .....

.....  
**Commissioner of Oaths**

SAMPLE

SAMPLE

SAMPLE

SAMPLE

SAMPLE

SAMPLE

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SAMPLE

SAMPLE