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## **APPENDIX I**

## ASSETS OF COMMUNITY VALUE - REGISTRATION FORM

1. Your details	
a. Name	
b. Address	
Postcode	
Is this your home address, or the organisation's address? Yes / No	1
c. Contact number	_
d. Email address	_
e. Who are you representing? (for example Parish Council/Community	
Group)	_
f. Please attach evidence that you have the authority of the group to make this nomination (for example minutes of a meeting where the decision is recorded) 2. Asset name	
	_
3. Brief description of the nominated land/building and proposed boundaries (for example, age of asset or building, previous use and purpose, type of construction, timber frame, prefabricated concrete)	-
	_

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4. Asset address		
	Postcode	
5. The name of current occupiers of	f the land	
	own address of all those holding a freehold	
or leasehold estate in the land		
7. Nature of arrespetted at societies	- (nlanca chance and catagomy)	
7. Nature of current/most recent use	e (please choose one category)	
Health centre	Heritage	
School	Green Space	
Swimming Pool	Shop	
Library	Theatre	
Community Centre	Youth Centre	
Children's Centre	Town Hall	
Day Care Centre	Residential Home	
Hotel	Mixed Use	
Offices	Religious building	
Other (please state):		

**8. Current status of the building/land** (please choose the most appropriate)

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Classification: NULBC UNCLASSIFIED In Community Use In Public Ownership **Under Consultation** Temporary Use **Empty Building Empty Home** Disused Land Surplus Property Under threat of closure Available for sale/rent/transfer **Under Transfer** Other (please state): 9. Please explain briefly why you think it is an asset of community value 10. Does this building/land have a deadline for proposals? 11. A photograph of the asset or any boundary drawings would be ideal to

support the registration, so please attached to this form.

Signature\_\_\_\_\_

Print Name Date

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