



**REPUBLIC OF VANUATU**

**LAND REFORM ACT [CAP 123]**

**Form for the Application for Lease on State Land (Urban)  
Order No. 158 of 2014**

In exercise of the powers conferred on me by subsection 20(1) of the Land Reform Act [CAP 123], I, the Honourable RALPH REGENVANU, Minister of Lands and Natural Resources, make the following Order.

**1 Form for the Application for Lease on State Land (Urban)**

Form for the Application for Lease State Land (Urban) is set out in the Schedule.

**2 Commencement**

This Order commences on the day on which it is made.

Made at Port Vila this 1<sup>st</sup> day of Sept, 2014.

  
  
Honourable RALPH REGENVANU VANUATU  
Minister of Lands and Natural Resources  
RESSOURCES NATURELLES  
MINISTRE DES

**SCHEDULE**

**APPLICATION FOR LEASE ON STATE LAND (URBAN)**

URBAN APPLICATION FORM DOL FORM 8



**DEPARTMENT OF LANDS, LANDS SURVEY AND LAND RECORDS**  
Private Mail Bag 9090, Port Vila, Vanuatu  
Telephone: (678) 22892 / 5334540

**APPLICATION FOR LEASE ON STATE LAND (URBAN)**  
*(You must be over 18 years of age to apply for a new lease)*

**\*\* TWO (2) COPIES OF THIS FORM MUST BE SUBMITTED \*\***

**FOR OFFICE USE ONLY**

Application Number: /	Fees Paid (Circle): Yes / No	Received by:
Amount Paid:	Date Received:	
Receipt No.:	LMPC DB ID: /	

**TO BE FILLED OUT BY THE APPLICANT(S)**

[PLEASE ATTACH ADDITIONAL INFORMATION AS REQUIRED]

**(\*NOTE: APPLICANTS FOR A LEASE ON STATE LAND FOR PUBLIC PURPOSES, CHARITABLE PURPOSES OR FOR PUBLIC INFRASTRUCTURE ARE NOT REQUIRED TO PAY FEES FOR THIS APPLICATION BUT MUST PROVIDE DETAILS OF THEIR CHARITABLE STATUS (see after Section 1c). FOR ALL OTHER APPLICANTS, FEES FOR THIS APPLICATION ARE NOT REFUNDABLE\*)**

**1a. Applicant Details (If a Person)**

First Name(s):		
Surname (s):		
Occupation:	Address:	
Phone No.s:	E-mail:	Fax:

SCHEDULE  
APPLICATION FOR LEASE ON STATE LAND (URBAN)  
FORM 8

Nationality:		Citizenship Status: Citizen / Non-Citizen <i>(circle one)</i>	
CIIP Citizen: Yes / No <i>(circle one)</i>		CIIP Permit No: <i>(Attach copy of Permit)</i>	Date issued:
Expatriate Resident: Yes / No <i>(circle one)</i>	Residence Permit No:	Date Issued:	No of Years:
VIPA Certificate No: <i>(Attach copy of Certificate)</i>		Date issued:	No of Years:
Overseas Resident: Yes / No <i>(circle one)</i>	Country of Residence:		
Other Leases held by the Applicant <i>(List Title Numbers and attach copies of Advice of Registration of Lease):</i>			

<b>1b. Other Applicant Details (include all additional details of any other persons applying for the certificate)</b>			
First Name(s):			
Surname (s):			
Occupation:		Address:	
Phone No.s:	E-mail:	Fax:	
Nationality:		Citizenship Status: Citizen / Non-Citizen <i>(circle one)</i>	
CIIP Citizen: Yes / No <i>(circle one)</i>		CIIP Permit No: <i>(Attach copy of Permit)</i>	Date issued:
Expatriate Resident: Yes / No <i>(circle one)</i>	Residence Permit No:	Date Issued:	No of Years:
VIPA Certificate No: <i>(Attach copy of Certificate)</i>		Date issued:	No of Years:
Overseas Resident: Yes / No <i>(circle one)</i>	Country of Residence:		
Other Leases held by the Applicant <i>(List Title Numbers and attach copies of Advice of Registration of Lease):</i>			

<b>1c. Applicant Detail (If a Company, Charitable Association or Organisation)</b>		
Legal/ Registered Name (In full):		
Trading Name (If used):		
Postal Address:		
Phone No.:	Email Address:	Fax:

Country of Registration: <i>(Attach Registration Certificate &amp; Articles of Association)</i>	
VIPA Certificate No: <i>(Attach copy of Certificate)</i>	Business License No: <i>(Attach copy of Business License)</i>
Are you a registered charity under the Charitable Associations Incorporation Act [CAP 140]?: Yes / No <i>(circle one)</i>	
If Yes, please attach Registration Certificate & Articles of Association	
Name and Address of Person Holding Responsibility as: a) if a Company: Director of Company and Major Shareholder b) if a Charitable Association: Director and Chairman of the Committee	

**[\*\*NOTE: if applying as a Charitable Association, you must provide additional evidence that:**

- (a) the Charitable Association operates in the interest of the public as evidenced by the delivery of charitable services to a substantial number of people in Vanuatu; and**
- (b) the Charitable Association is a non profitable association; and**
- (c) the activities of the Charitable Association are based solely in Vanuatu].**

## 2. Land Detail (Attach Location Plan of Area Applied for)

Location Town:	
Location Area (Suburb or Ward):	
Title No.s (If applicable):	Pre Indp Title or Old Title (if no Title No.):
Area (m <sup>2</sup> /ha):	

**[\*\*You must attach the Survey / Title Plan to this Form – or if no such Plan exists, a detailed sketch or aerial map showing the location of the land being applied for].**

Give a brief description of the terrain/topography of the land
What is the land currently being used for?

Description of any physical improvement(s) on the land:
What is the current zoning of the area where the land is located?

**3. Proposed Development of Land**

The Purpose for which the land will be used: <i>(tick one)</i> <ul style="list-style-type: none"><li><input type="radio"/> Residential</li><li><input type="radio"/> Commercial (including Tourism)</li><li><input type="radio"/> Industrial</li><li><input type="radio"/> Public infrastructure</li><li><input type="radio"/> Other public purpose (Please State) .....</li><li><input type="radio"/> Charitable purpose (Please State) .....</li><li><input type="radio"/> Special (Please State) .....</li><li><input type="radio"/> Other (Please State) .....</li></ul>
Please state the nature of proposed development on the land:
What are the proposed improvements to be undertaken on the land?
Describe how the development will satisfy planning requirements including: road access; waste water runoff and drainage; provision of water and electricity services; provision for sewerage; and waste disposal.
What (if any) public consultations have been undertaken about the proposed development?

In what way is the proposed development in the public interest?
Are there any other development permission(s) that have been applied for?
What is the proposed value of the development (please include a estimation of the expenditure associated with any capital investment in the proposed development)?
How will the proposed development be funded (include details of the sources of funding)?
Please list any other developments that the applicant(s) have been involved in in Vanuatu.
Please provide evidence (including bank letters etc) that demonstrate the applicant(s) good commercial reputation.

#### 4. Cultural or Historical Sites or Building

Are there any sites or buildings of cultural and/ or historical significance on the land?
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If so, what plans have been put in place to ensure that they are protected?

### 5. Environmental and Geo Hazard Issues

Are there any conservation areas or areas of sensitive ecosystem, endemic species or species with high bio-diversity value on the land or near the land?

Is the land vulnerable to the effect of climate change such as rising sea level, flooding rivers, lands slide etc.?

Is the land vulnerable to the effects of natural disasters such as volcanoes, landslides etc.?

**APPLICANT(S) STATEMENT**

I /We \_\_\_\_\_ applicant(s) declare that the above information is true and correct to the best of my/our knowledge and that all relevant information has been provided to allow the Land Management Planning Committee to make a proper informed decision.

I/We \_\_\_\_\_ applicant(s) declare that we consent to follow all proper processes in the application for a lease over state land including all legal processes of relevance in the tendering of public property.

Signature(s) \_\_\_\_\_

Date \_\_\_\_\_

Witness(s) \_\_\_\_\_

**\*\* WARNING \*\***

**If the Committee considers that any of the information provided is false or misleading, the application will be declined.**



**COMMENT OF RELATED GOVERNMENT AGENCIES**

**ENVIRONMENT DEPARTMENT: Comments and Recommendations**

- Is the land and its location vulnerable or subject to environmental issues?

Name of Officer completing Checklist: .....

As the relevant officer I confirm that I have fulfilled all duties with respect to the administrative, financial and legal requirements of the Department of Lands and relevant legislation and am not acting in bad faith.

Signature of Officer: .....

*(Department Stamp)*

**GEO-HAZARDS DEPARTMENT: Comments and Recommendations**

- Is the land and its location vulnerable to sea-level rise, flooding or other natural disasters?

Name of Officer completing Checklist: .....

As the relevant officer I confirm that I have fulfilled all duties with respect to the administrative, financial and legal requirements of the Department of Lands and relevant legislation and am not acting in bad faith.

Signature of Officer: .....

*(Department Stamp)*

**GEOLOGY AND MINES DEPARTMENT: Comments and Recommendations**

- Is there a quarry on the land? Are there any other issues relating to minerals?

Name of Officer completing Checklist: .....

As the relevant officer I confirm that I have fulfilled all duties with respect to the administrative, financial and legal requirements of the Department of Lands and relevant legislation and am not acting in bad faith.

Signature of Officer: .....

*(Department Stamp)*

**MUNICIPAL PLANNER: Comments and Recommendations**

- Confirmation that the land is under a Physical Plan area?
- Any issue that is affecting the area where the land is?
- Any development permit or license required by this application?

Name of Officer completing Checklist: .....

As the relevant officer I confirm that I have fulfilled all duties with respect to the administrative, financial and legal requirements of the Department of Lands and relevant legislation and am not acting in bad faith.

Signature of Officer: .....

*(Department Stamp)*

**LANDS & SURVEY DEPARTMENT: Comments and Recommendations**

- Does the area of the land title meet the required size for the proposed purpose?
- Is there any issue/error that affects this land title?

Name of Officer completing Checklist: .....

As the relevant officer I confirm that I have fulfilled all duties with respect to the administrative, financial and legal requirements of the Department of Lands and relevant legislation and am not acting in bad faith.

Signature of Officer: .....

*(Department Stamp)*

**VANUATU CULTURAL CENTRE: Comments and Recommendations**

- Confirmation of cultural/historical site in the area or land title.
- Detail of cultural/historical site if any.

Name of Officer completing Checklist: .....

As the relevant officer I confirm that I have fulfilled all duties with respect to the administrative, financial and legal requirements of the Department of Lands and relevant legislation and am not acting in bad faith.

Signature of Officer: .....

*(Department Stamp)*