

Shared Boundary Agreement											
I,						(name of neighbour)					
Understand that,						(name of applicant)					
of Main Farm Code				/		proposes to manage the following					
Type of boundary feature		Amount m or sqm				Field Identifier (e.g. NY/12345/12345)					
		.		sqm		/					
		.		sqm		/					
		.		sqm		/					
		.		sqm		/					
I confirm we have a management agreement to maintain the boundary in the proportion of											
						(e.g. 50/50 neighbour/applicant).					
I will manage the boundary feature in accordance with the requirements for the management of linear features option Notes for Guidance (LMO1).											
I understand that						(name of applicant) participation					
in Land Managers Options will be for a minimum period of 5 years and I will comply with this undertaking during that time.											
Signed (Neighbour)						Date					
						D D / M M / Y Y Y Y					
I confirm that the above details are correct											
Signed (Applicant)						Date					
						D D / M M / Y Y Y Y					