



GOVERNMENT OF BERMUDA

**Department of Planning**

**NEIGHBOUR'S ACKNOWLEDGEMENT FORM**

Planning Application Reference No. (*if available*) \_\_\_\_\_

Address of land to be developed: \_\_\_\_\_

Description of Proposed Development: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I/We (or for a Trust), the undersigned (*full name(s) clearly printed*):

\_\_\_\_\_

am/are the **owner(s)** of: \_\_\_\_\_,  
*(address)*

the property to the north/south/east/west of the development site.

*(circle appropriate)*

I/We confirm we have reviewed the drawings dated \_\_\_\_\_ with drawing reference  
no(s). \_\_\_\_\_ and drawn by: \_\_\_\_\_

showing the above mentioned description of proposed development.

**Disclaimer:** *By signing this form, I/we hereby acknowledge the proposed development  
within the setback to the shared boundary and understand that our signature does not  
confer consent nor objection.*

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

*Note: If you object to the proposed development, please submit your concerns in writing separately to the Department  
of Planning at the address below. All objections should be received within 14 days of an application being advertised.*