

**CREDIT HOLDER CONSENT FORM FOR TDR ASSIGNMENT OR REASSIGNMENT**

I, \_\_\_\_\_, residing at \_\_\_\_\_  
\_\_\_\_\_, do hereby certify the accuracy and veracity of this Consent Form, which is required pursuant to the “Application for Assignment or Reassignment of TDR Credits” Form that is derived from the State Transfer of Development Rights (TDR) Act and Township of Woolwich’s TDR Ordinance.

I hereby expressly consent and agree that the Applicant, \_\_\_\_\_, has my permission, support and authorization to make an application for an (check one) \_\_\_\_\_ assignment or \_\_\_\_\_ reassignment of TDR credits under the Township of Woolwich’s TDR plan and associated implementing documents. I specifically consent to the (check one) \_\_\_\_\_ assignment or \_\_\_\_\_ reassignment of \_\_\_\_\_ TDR credits from Block \_\_\_\_\_, Lot \_\_\_\_\_.

I make this Certification of Consent voluntarily and am under no duress or undue influence. I am of sound mind and am aware of the binding effect of this legal document. I am over 18 years of age and again consent to the use of my TDR credits for the purpose stated herein.

Dated:

\_\_\_\_\_  
Signature

Address: