

(Owner)

(Location/Address)

Landlord Letter of Consent

(Insert owner) is/(are) the owner(s) of the property located at (insert facility name and address). The property is currently leased by (insert recipient/lessee). (Insert owner) currently has/will have a lease agreement with (insert recipient/lessee), for a period of years that will expire on (insert date).

(Insert owner) is/(are) in full agreement of the proposed improvements to the above leased property as part of the Health Resources and Services Administration (HRSA) Quality Improvement Fund - Improving Access to Dental Services for Children with Neurodevelopmental Disorders (QIF-DNDD) funding opportunity, and grant permission to (insert recipient/lessee) to undertake proposed improvements.

(Insert owner) also acknowledge that there will be a Federal interest in the property as a result of the proposed improvements even though filing the Notice of Federal Interest is not required for alteration/renovation projects with a total cost less than \$1,000,000.

Landlord/Corporation Signature: _____

Typed Name: _____ Title: _____

Date: _____

Applicant Signature: _____

Typed Name: _____ Title: _____

Date: _____