# **Annex B: Draft Expression of Interest Form Part A**

## [Draft] Marine Recovery Fund Expression of Interest Form - Part A

Please use this form to formally apply for a reservation of a strategic compensatory measure (SCM) from Defra, as the Marine Recovery Fund (MRF) Operator in relation to predicted adverse effect(s) on features, habitats or species within Marine Protected Area(s) from proposed offshore wind activities.

The SCM you are applying for must be an available measure. The published list of available SCMs can be found <a href="here">here</a> and is routinely kept updated. If you wish to apply for the reservation of more than one type of SCM, please submit one form per type of SCM.

If you already have consent for your offshore wind project/plan, please submit a completed version of this form (Part A) and a completed Expression of Interest – Part B form.

MRF Reference Number: (To be assigned by MRFO)	
1. Applicant	
Company/Organisation name:	
Adress Line 1:	
Address Line 2:	
City:	
County/Region:	
ZIP/Postal Code:	
Named point of contact:	
Email address:	
Telephone number:	
2. Agent Are you acting on behalf of an ap	oplicant?
Yes □	
No □	
If yes, please list your details bel	ow.
Company/Organisation name:	

Address Line 1:	
Address Line 2:	
City:	
County/Region:	
ZIP/Postal Code:	
Named point of contact:	
Email address:	
Telephone number:	
	ne. If the project has already been consented to, or is ease provide the name consistent with how it is ion.
<ul><li>4. Relevant Consent</li><li>Does the project already have the</li><li>Yes □</li><li>No □</li></ul>	e relevant consent?
	timeframe within which you will aim to submit your
and/or an uploaded document	as supporting documentation below, as a weblink (for example, a link to the Statutory Instrument, marine licence case reference number, etc).

r	
I .	
<ul> <li>Drop fi</li> </ul>	les or click to upload i
I .	
I .	D
I .	Browse
I .	
L	

Please sta to reserve	te the <u>ON</u> more tha Note: this	E SCM you are applying for, and the required quantity. If you wish one SCM, you must submit a separate Eol form (i.e. one per must be selected from the published list of available SCMs, which
Name of S	SCM:	
Qua	ntity:	
The follow application	n. If the res at Defra's	stions relate to essential prerequisites for a successful MRF sponse to any question is 'no' and without justification (as deemed discretion, as MRF Operator), applicants will not be able to
Please defrom The 0		you have an agreed and appropriate lease/agreement for lease tate?
,	Yes	
	No	
Please co	onfirm tha ent of you	cation Detail, Section A  t you have undertaken/will undertake the following actions in r project/plan:  th the relevant Statutory Nature Conservation Bodies.
,	Yes	
	No	
(OV	VES) in r	adhere(d) to the relevant Offshore Wind Environmental Standards respect to your Leasing Round, and that this will be/has been our consent application.
,	Yes	
	No	

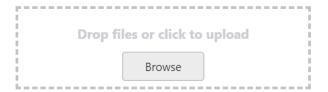
3.	<ol><li>Appropriately sought to avoid, reduce, and adequately mitigate for adverse impacts prior to seeking compensatory measures as a last resort.</li></ol>		
	Yes		
	No		
•	-	e following:	
1.	or related installed	ement outlining the location and design of the project/plan proposal, development, including where possible the planned capacity (MW), apacity (MW), and appropriate grid referencing (for example, survey map, latitude/longitude references, etc).	
	Drop file	or click to upload  Browse	
2.	the propo	nmary of (without prejudice) adverse effects likely to be caused by ed project/plan throughout its development for which you are seeking sate via the MRF (500 words max).	
3.	applicant for advers	of SNCB advice that corroborates (without prejudice) that the as appropriately sought to avoid, reduce, and adequately mitigate impacts prior to seeking compensatory measures as a last resort le, Discretionary Advice Service correspondence).	
	Drop file	or click to upload Browse	

4. Evidence of SNCB advice that confirms the (without prejudice) suitability of the requested SCM and its quantity for the (expected) adverse impact for which you are seeking compensation (for example, Discretionary Advice Service correspondence).

Drop files or click to upload	
Browse	
Document description/further inforr	nation:
projections of when the relevant a	or project/plan implementation, including dverse effect(s) will occur. The timescales ame for when the requested compensatory

## 7. Additional Documentation (optional)

Please attach any additional documents considered necessary to support this application, along with a titled description of the document. Applicants are encouraged to use discretion on which documentation they provide, provided they present substantive evidence as requested throughout the EoI form and do not omit any material information.



### 8. Additional Information (optional)

Please provide a brief description of any other information provided that is in support of the application, but which has not been explicitly required.

9. Fee Please state the preferred manner for the payment of the reservation fee (for example, BACS, CHAPS). Payment of the reservation fee will be requested upon, and subject to, reviewal and acceptance of your EoI application.
10. Declaration
I declare to the best of my knowledge that the information given in the form and enclosed documents are accurate and true.
Signature:
X
Print Name:
For and on behalf of (Company/Organisation):
Title/Role:
Date: