



FEE \$ 60.00
GST exempt
1/7/20 - 30/6/21
 Form No. GEN06v18

**APPLICATION FOR PERMIT FOR A WATER AFFECTING ACTIVITY
 USE EFFLUENT IN THE COURSE OF CARRYING ON A BUSINESS**

Pursuant to Section 112 of the Landscape South Australia Act 2019

A person who furnishes information to the Minister or another authority under the Landscape South Australia Act 2019 (the Act) that is false or misleading in a material particular is guilty of an offence. Maximum penalty: \$20 000.

1. APPLICANT DETAILS

Name(s) in full _____

If Body Corporate: ACN _____

Contact postal address: _____

Local Council: _____

Property Identifier, e.g. CFS plate, property name: _____

Contact Name: _____ Telephone No: _____

Mobile: _____ Fax: _____

Email: _____

2. PROPERTY DETAILS

LAND ON WHICH WATER IS PROPOSED TO BE USED, BEING LAND WHICH THE APPLICANT HAS A LEGAL ENTITLEMENT TO USE IN THE PROPOSED MANNER:

Title Reference Volume and Folio number	Allotment Number	Plan Number	Section	Hundred

Local Council: _____

Property Identifier, e.g. CFS plate, property name: _____

For Office Use Only:	Application No	Receipt No	Invoice No	Batch No
Date Received: _____				
Amount Paid: \$ _____				
Area: _____				

It is an offence to provide information on this form that is false or misleading in a material particular and may result in this application being refused.

**FAILURE TO PROVIDE COMPLETE DETAILS OF INFORMATION OR FAILURE TO PAY THE FEE WILL
DELAY PROCESSING OF THIS APPLICATION**

3. PROPOSED WATER SOURCE

Source(s) (e.g. winery effluent)	Volume (megalitres per annum)

4. PROPOSED WATER USE

(1) Irrigation

Crop Type	Area (ha)	Irrigation Rate	Comments

APPLICATION METHOD (EG DRIPPERS) _____

(2) Industrial

Type of Industry	Volume (kL)	Comments

(3) Stock

Type of Stock	Volume (kL)	Comments

(4) Environment

Details	Volume (kL)	Comments

(5) Recreation

Details	Volume (kL)	Comments

(6) Other

Details	Volume (kL)	Comments

5. DETAILS OF ANY TREATMENT METHOD PROPOSED

PLEASE PROVIDE DETAILS OF ANY TREATMENT METHOD PROPOSED

6. PROPOSED METHOD OF STORAGE

Storage Dam

Existing/Proposed

Strike out whichever does not apply

NOTE: If the dam is yet to be constructed approval will be required to construct the dam. If the dam is less than 5.0 megalitres in capacity, a permit issued by the relevant authority will be required. If the dam is proposed to have a capacity greater than 5.0 megalitres, development approval from your local council will be required. Please contact the Department on (08) 8463 6876 for further information.

Lined/Unlined

Strike out whichever does not apply

If lined:

Clay/Plastic

Strike out whichever does not apply

Capacity (ML) _____

On-stream/Off-stream

Strike out whichever does not apply

Storage Tank

Other (please specify) _____

7. OTHER APPROVALS

WHAT, IF ANY, APPROVALS DO YOU OR YOUR COMPANY HAVE FROM OTHER STATE OR LOCAL GOVERNMENT AGENCIES TO CARRY OUT THE PROPOSED ACTIVITY?

EPA Licence Number _____

ALL APPLICANTS MUST SIGN AND DATE THIS APPLICATION

Please be aware that it is an offence to provide information on this form that is false or misleading.

SECTION 8: SIGNATURE OF THE APPLICANT

NOTE: Each applicant must complete ONE (only) of the following alternatives

I/We declare that the information that has been provided on this application is true and correct.

Note: If signing as a company, two position bearers must sign e.g. Director, Secretary. If only one Director then Sole Director must be stated as position held.

1. Where the applicant is an individual or two or more persons

Print Name	Sign Here	Date
Print Name	Sign Here	Date
Print Name	Sign Here	Date
Print Name	Sign Here	Date

2. Where the applicant is a company or an incorporated association and authorised persons sign on behalf of the organisation

Print Name of authorised person	Position held
Signature	Date
Print Name of authorised person	Position held
Signature	Date

The person(s) duly authorised to sign for and on behalf of:
(print name of company or incorporated association)

3. Where the applicant is a company or an incorporated association and the seal is affixed:

The Seal of: (print name of company or incorporated association)

was hereby affixed in the presence of:

Signature	Affix Seal Here:	
Print Name		
Position held	Date	
Signature		
Print Name		
Position held	Date	

Return application and payment to:
Department for Environment and Water
GPO Box 1047
ADELAIDE SA 5001

Make cheques or money orders payable to:
Department for Environment and Water

For credit card payments or other payment options, please telephone:
(08) 8463 6876

Office Location:
Customer Service Centre
81-95 Waymouth Street
ADELAIDE SA 5000