



**APPLICATION FOR CONSENT TO  
TRANSFER A CROWN LEASE**  
*Pursuant to Section 36 of the Crown Land Management Act (2009)*

<b>For Office Use Only</b>		AMOUNT DUE	<b>\$463.00</b>
APPLICATION NO.		DATE RECEIVED	/ /
RECEIPT NO.			

**GENERAL INFORMATION**

- This form is to be used to apply for consent to transfer a Crown lease. For further information refer to: <https://www.environment.sa.gov.au/topics/crown-land>
- This form does not apply to pastoral leases managed under the Pastoral Land Management and Conservation Act (1989).** For further information please refer to: [https://www.pir.sa.gov.au/primary\\_industry/pastoral\\_leases\\_in\\_sa](https://www.pir.sa.gov.au/primary_industry/pastoral_leases_in_sa)
- Please contact your local Crown Lands office regarding eligibility to transfer or requirement to freehold.
- Please contact DEWShacks@sa.gov.au regarding life tenure shack leases.
- It is highly recommended that you seek the assistance of a registered conveyancer or legal practitioner to complete your application.
- Please attach a copy of your proposed 'Memorandum to Transfer' to this form ( ) - this will be completed by your conveyancer.
- On approval, a lease is an exclusive right to occupy the land.
- Please use 'BLOCK' letters if you are filling this form in by hand.
- This form must be signed personally by the applicant(s).
- For information about how to obtain land details see: <https://www.environment.sa.gov.au/topics/crown-land/south-australias-crown-land>
- Payment - Cheques should be made payable to Department for Environment and Water and marked 'Not Negotiable'. You will be contacted by phone for credit card payments by MasterCard or Visa.

**LAND DETAILS**

SECTION/ALLOTMENT	PLAN	HUNDRED
TITLE REFERENCE <b>CL</b>	VOLUME NO.	FOLIO NO.
CROWN LANDS LEASE NUMBER		
<b>PROPOSED TENANCY TYPE</b>		
Sole tenant	Tenants in common	With no survivorship (Trust)
		Joint tenants

**LODGED ON BEHALF OF APPLICANT**

*Complete this section if you are lodging the application on behalf of another party and wish to remain as the contact person for this transaction.*


FULL NAME (FIRST, MIDDLE & SURNAME IN FULL)	
LEGAL/BUSINESS NAME (IF APPLICABLE)	
PHONE AND/OR MOBILE	EMAIL

**CONVEYANCER OR SOLICITOR**

*Please provide the details of the conveyancer or solicitor managing this transaction.*

FULL NAME (FIRST, MIDDLE & SURNAME IN FULL)	
LEGAL/BUSINESS NAME (IF APPLICABLE)	
PHONE AND/OR MOBILE	EMAIL

## APPLICANTS DETAILS

 If there are further applicants please complete and submit Annexure A with this form.

### TRANSFEROR (CURRENT LEASE HOLDER)

FULL NAME (FIRST, MIDDLE & SURNAME IN FULL)		DATE OF BIRTH
LEGAL/BUSINESS NAME (IF APPLICABLE)		
ABN	ACN	
POSTAL ADDRESS		
STREET ADDRESS		
TOWN/SUBURB	STATE	POSTCODE
PHONE AND/OR MOBILE	EMAIL	

### TRANSFeree (PROPOSED LEASE HOLDER)

FULL NAME (FIRST, MIDDLE & SURNAME IN FULL)		DATE OF BIRTH
LEGAL/BUSINESS NAME (IF APPLICABLE)		
ABN	ACN	
POSTAL ADDRESS		
STREET ADDRESS		
TOWN/SUBURB	STATE	POSTCODE
PHONE AND/OR MOBILE	EMAIL	

## ACKNOWLEDGEMENT

### TRANSFEROR (CURRENT LEASE HOLDER)

I/We hereby request that approval be given for consent to transfer in respect to the subject land.

SIGNATURE OF TRANSFEROR	DATE
TRANSFEROR NAME (PRINT)	

### TRANSFeree (PROPOSED LEASE HOLDER)

I/We accept liability for any amount owing to the Department for Environment and Water in respect to the subject land.

I/We declare the particulars supplied on this application form to be true and correct.

SIGNATURE OF TRANSFeree	DATE
TRANSFeree NAME (PRINT)	

## LODGEMENT INFORMATION

Please return the completed form to the Crown Lands Program Office:

GPO Box 1047  
Adelaide SA 5001  
Phone: (08) 8204 1218  
[DEW.CrownLands@sa.gov.au](mailto:DEW.CrownLands@sa.gov.au)