



FEE \$ 237.00
GST exempt
01/07/18 - 30/06/19
Form No: BNWL2v1

APPLICATION FOR A WATER LICENCE
(ALLOCATION MUST BE TRANSFERRED FROM AN EXISTING WATER LICENCE)

Pursuant to Section 146 of the Natural Resources Management Act 2004

A person who furnishes information to the Minister or another authority under the Natural Resources Management Act 2004 (the Act) that is false or misleading in a material particular is guilty of an offence.

Maximum penalty: \$20 000.

Please tick:

Angas Bremer PWA

Peake, Roby and Sherlock PWA

Mallee PWA

SECTION 1: APPLICANT DETAILS
Full Name(s) of applicant(s)
Full Name(s) of applicant(s)
Full Name(s) of applicant(s)
Full Name(s) of applicant(s)
If Body Corporate: ACN
Contact Name
Address
Town/Suburb State Postcode
Home Phone Work Phone Mobile Phone
Email Fax
Licence number from which the water allocation is being transferred:
Note: Allocation transfers can only occur within the same prescribed resource. You must also lodge the respective application for limited (temporary) or absolute (permanent) water allocation transfer signed by you as transferee (purchaser), and signed by the transferor (seller).

Table with 5 columns: For Office Use Only, Application No, Receipt No, Invoice No, Batch No. Includes fields for Date Received, Amount Paid, and Area.

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 2: 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.

SIGNED:

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	
Signature	
Print Name	
Position held	

RETURN APPLICATION AND PAYMENT TO:

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

Return application and payment to:
Department for Environment and Water
PO Box 240
BERRI SA 5343

Office Location:
2 Wade Street
BERRI SA 5343

Telephone enquiries: (08) 8595 2053