



L.6 SOUTHERN BASINS AND MUSGRAVE PRESCRIBED WELLS AREAS Application for a Water Access Entitlement Pursuant to Section 122 of the *Landscape South Australia Act 2019*

- Note:**
- Failure to provide complete details and/or prescribed fee will result in your application being returned for completion.
 - If this application is approved, the licence holder will also need a Water Resource Works Approval to extract the underground water.
 - 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.

1. Applicant Detail

- Note:**
- If this application for a water access entitlement is approved and the applicant does not have a current licence, a new licence will be issued.
 - The name(s) given below must be legal entities, as these will be the name(s) that will appear on the water licence and water account if this application is approved. If applying as a trustee please state the name of the trust.

Licence Number _____

Full Name(s) of applicant(s) _____

Contact Person _____ If Body Corporate, ACN _____

Contact Address _____

Suburb _____ State _____ P/Code _____

Telephone _____ Mobile _____

E-mail _____

Please tick if address details are to be updated

2. Water Access Entitlement Detail

- Note:**
- Full payment for the water access entitlement will become due on a date nominated on an invoice that will be dispatched with, or soon after, notification of the outcome of your application.

Name of consumptive pool _____

Number of shares _____ Price per share \$ _____ Total value (price) \$ _____

If the Total Value (price) is \$0, you are required to provide a reason: _____

For Office Use Only:

Date Received	_____	Application No	Receipt No	Invoice No	Batch No
Amount Paid \$	_____				
Area	_____				

3. Signature of the Applicant: Note: Complete one only of the following alternatives.

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

3.1 Where the applicant is one or more persons

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

Name _____

Signature _____ Date _____

Name _____

Signature _____ Date _____

Name _____

Signature _____ Date _____

Name _____

Signature _____ Date _____

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

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

Name of authorised person _____

Signature _____ Position held _____

Date _____

Name of authorised person _____

Signature _____ Position held _____

Date _____

The person(s) above are authorised to sign on behalf of: _____
(print name of company or incorporated association)

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

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

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

was hereby affixed in the presence of:

Name of authorised person _____

Position held _____

Signature _____ Date _____

Name of authorised person _____

Position held _____

Signature _____ Date _____

Affix Seal Here:

Return application and payment to:

Department for Environment and Water
PO Box 240, BERRI SA 5343

Make cheques or money orders payable to:

Department for Environment and Water

Office Location:

2 Wade Street
BERRI SA 5343

For credit card payments or other payment options, please

telephone: (08) 8595 2053