



FEE \$471.00
GST Exempt
01/07/20 - 30/06/21
Form No. SE02v23

SOUTH EAST REGION

APPLICATION FOR THE TRANSFER OF A WATER LICENCE

Pursuant to Section 125 of the Landscape South Australia Act 2019

A person who furnishes information to the Minister or other 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.

Note: Failure to provide full details or the prescribed fee may result in the return of the application and a delay in processing.
Note: The Minister may refuse to grant approval for a transfer under section 125(7)(b) of the Landscape South Australia Act 2019 until any water levy that has been imposed in relation to the licence has been paid.

1. APPLICANT(S) DETAILS

TRANSFEROR(S) (seller)
Licence Number:
Licence Holder Name(s):
Note: Name(s) provided must be LEGAL ENTITIES and must be IN FULL as it appears on the licence.
If Body Corporate: ACN:
Postal Address:
Contact Name: Telephone No:
Mobile: Fax: Email:

TRANSFeree(S) (purchaser)
Applicant Name(s):
Note: Name(s) provided must be LEGAL ENTITIES and must be IN FULL as it is proposed to appear on the licence.
If Body Corporate: ACN:
Postal Address:
Contact Name: Telephone No:
Mobile: Fax: Email:

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

2. TRANSFER VALUE DETAILS

TOTAL AMOUNT PAID OR PAYABLE FOR THE WATER (Excluding Land Price) \$ _____

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

Note: The sale of Water Licences are not subject to stamp duty. Please provide the amount paid for the water licence only, excluding the land price.

3. TRANSFER REQUEST AND DETAILS

I/WE HEREBY REQUEST THAT APPROVAL BE GIVEN FOR:

3.1 The LIMITED (**Temporary**) Transfer or ABSOLUTE (**Permanent**) transfer (please tick)

Of HOLDING or TAKING allocation (please tick)

for the WHOLE OF WATER LICENCE NUMBER: _____

With a TOTAL WATER ALLOCATION of: _____ kilolitres

3.2 The LIMITED (**Temporary**) Transfer period will:

COMMENCE: **1 July 2020** and EXPIRE **30 June**: _____
(write year)

3.3 Does this allocation have Specialised Production Requirements (SPR) Yes or No (please tick)

If YES what is the SPR allocation: _____ kilolitres

Note: SPRs can only be transferred if they are going to be used on the same land for the same purpose or, if allocated for rotational crops, they are to be used for the same purpose.

4. PROPOSED AREA AND SOURCE OF WATER SUBJECT TO TRANSFER

4.1 PROPOSED SOURCE OF WATER: Unconfined Aquifer Confined Aquifer (please tick)

4.2 Held in the Management Area of: _____

5. METER READING

Please provide the transferor(s) (sellers) meter reading(s) with this application – this will assist in determining your application.

Date of Reading	Meter Number	Meter Reading

6. SPECIAL METER READING

Should you wish to determine the total volume of water taken at the date of transfer of the water licence you can apply for a special meter reading by completing an Application for a Special Meter Reading form accompanied by the gazetted fee.

A special meter reading can assist the transferor and transferee in determining who should pay for any relevant charges applicable to the water licence.

7. ANY OTHER COMMENTS

ALL PARTIES TO THE TRANSFER MUST SIGN AND DATE THIS APPLICATION
ONLY ORIGINAL SIGNATURES WILL BE ACCEPTED

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.

8. SIGNATURE OF THE TRANSFEROR(S) (the sellers):

Note: Each transferor 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 the authorised person(s) duly authorised to sign for and behalf of the organisation:		
Name of company or Incorporated Association:		
Print Name:	Sign Here:	Date:
Position Held:		
Print Name:	Sign Here:	Date:
Position Held:		
3. Where the applicant is a company or an incorporated association and the Seal is affixed:		
The Seal of _____ [Write name of Company or incorporated association]		
was hereby affixed in the presence of:		Affix Seal in Box
Print Name:	Sign Here:	
Position Held:	Date:	
Print Name:	Sign Here:	
Position Held:	Date:	

ALL PARTIES TO THE TRANSFER MUST SIGN AND DATE THIS APPLICATION
ONLY ORIGINAL SIGNATURES WILL BE ACCEPTED

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.

9. SIGNATURE OF THE TRANSFEREE(S) (the purchasers):

Note: Each transferee 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 the authorised person(s) duly authorised to sign for and behalf of the organisation:		
Name of company or Incorporated Association:		
Print Name:	Sign Here:	Date:
Position Held:		
Print Name:	Sign Here:	Date:
Position Held:		
3. Where the applicant is a company or an incorporated association and the Seal is affixed:		
The Seal of _____ <div style="text-align: center; font-size: small;">[Write name of Company or incorporated association]</div>		
was hereby affixed in the presence of:		Affix Seal in Box
Print Name:	Sign Here:	
Position Held:	Date:	
Print Name:	Sign Here:	
Position Held:	Date:	
Return this application and your cheque or money order to: Department for Environment and Water 11 Helen Street Mount Gambier SA 5290 PO Box 1046 Mount Gambier SA 5290 For credit card payments or other payment options, please telephone: (08) 8735 1134		