



**WESTERN MOUNT LOFTY RANGES PRESCRIBED WATER RESOURCES AREA**  
**APPLICATION FOR VARIATION OF LICENCE ON ABSOLUTE (PERMANENT)**  
**OR LIMITED (TEMPORARY) TRANSFER OF ALLOCATION**

Pursuant to Section 124 of the *Landscape South Australia Act 2019*

Western Mount Lofty Ranges Prescribed Water Resources Area includes the Western Mount Lofty Ranges Prescribed Watercourses, Western Mount Lofty Ranges Prescribed Wells Area and Western Mount Lofty Ranges Surface Water Prescribed Area

*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.*

<b>SECTION 1: APPLICANT DETAILS – Transferor (Seller)</b>			
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		Water Licence No.	
Contact Name			
Address			
Town/Suburb		State	Postcode
Home Phone	Work Phone	Mobile Phone	
Email		Fax	
<b>APPLICANT DETAILS - Transferee – (Buyer)</b>			
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		Water Licence No.	
Contact Name			
Address			
Town/Suburb		State	Postcode
Home Phone	Work Phone	Mobile Phone	
Email		Fax	

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

**SECTION 2: ABSOLUTE (PERMANENT) / LIMITED (TEMPORARY) TRANSFER REQUEST AND DETAILS**

WE HEREBY REQUEST THAT APPROVAL BE GIVEN FOR THE ABSOLUTE/LIMITED TRANSFER (delete whichever does not apply)

Of \_\_\_\_\_ kilolitres

ENDORSED ON WATER LICENCE NUMBER: \_\_\_\_\_ TO WATER LICENCE NUMBER: \_\_\_\_\_

IF TO A NEW WATER LICENCE IS TO BE ISSUED, PLEASE TICK THIS BOX:

THE LIMITED TRANSFER BEING FOR A PERIOD (complete only if relevant)

COMMENCING ON: 01 / 07 / \_\_\_\_\_ (write year)

EXPIRING ON: 30 / 06 / \_\_\_\_\_ (write year)

Note: limited transfers will have effect for a full licence year, eg 1 July to 30 June.  
It is the transferor's responsibility to ensure sufficient allocation remains to cover the usage on their licence.

Total amount paid or payable for the water \$ \_\_\_\_\_ (excluding land price)

**SECTION 3: DETAILS OF ENTITLEMENT TRANSFERRED – TRANSFEROR ( SELLER)**

Provide details about the source(s) of water and water used for irrigation

Water Resource (e.g. underground, surface water, watercourse)	Water Source/Well No. (e.g. well, dam, watercourse)	Allocation to be transferred (kL)	Title Reference Volume & Folio No. where located	Purpose

**SECTION 4: SALINITY DETAILS – TRANSFEROR (SELLER)**

If you have undertaken salinity sampling in the 12 month period prior to submission of this application, please provide a salinity reading for all wells from where the water will be transferred:

Well Number	Salinity (milligrams/litre)	Date of sample	Well Number	Salinity (milligrams/litre)	Date of sample

SECTION 5: METER READINGS – TRANSFEROR (SELLER)						
Date of Reading	Meter Number	Meter Reading		Date of Reading	Meter Number	Meter Reading

SECTION 6: DETAILS OF WHERE THE ALLOCATION IS TO BE TAKEN – TRANSFEREE (BUYER)				
6.1 Provide details about the source/s of water and water used for irrigation				
Water Resource (e.g. underground, surface water, watercourse)	Water Source/Well No. (e.g. well, dam, watercourse)	Allocation to be transferred (kL)	Title Reference Volume & Folio No. Where located	Purpose

SECTION 7: SALINITY DETAILS – TRANSFEREE (BUYER)						
If you have undertaken salinity sampling in the 12 month period prior to submission of this application, please provide a salinity reading for all wells from where the water will be transferred:						
Well Number	Salinity (milligrams/litre)	Date of sample		Well Number	Salinity (milligrams/litre)	Date of sample

**SECTION 8: LAND WHERE WATER IS TO BE USED**

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

**SECTION 9: OTHER INFORMATION**

This section is optional. Please include any additional information to support your application


**SECTION 10: SPECIAL METER READING**

Should you wish to determine the total volume of water taken at the date of transfer of the water allocation you can apply for a special meter reading by completing an Application for a Special Meter Reading Form. Minimum fee is \$55.00 GST inclusive.

A special meter reading may assist both parties to determine who should pay charges applicable to the water licence.

**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 11: SIGNATURE OF THE APPLICANT – TRANSFEROR (SELLER)**

**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

**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 12: SIGNATURE OF THE APPLICANT – TRANSFEREE (BUYER)**

**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