



**FEE \$ 55.00**  
**GST inclusive**  
**1/7/17-30/6/18**  
Form No. ANB05v14

**ANGAS BREMER PRESCRIBED WELLS AREA**  
**APPLICATION FOR A SPECIAL METER READING**

*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.*

**APPLICATION IS HEREBY MADE FOR A SPECIAL METER READING:**

Full Name(s) of applicant(s) \_\_\_\_\_

OR

Company Name \_\_\_\_\_

ACN \_\_\_\_\_

Contact Address \_\_\_\_\_

Suburb \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Contact Person \_\_\_\_\_

Telephone: Home \_\_\_\_\_ Work \_\_\_\_\_

Mobile \_\_\_\_\_ Facsimile \_\_\_\_\_

E-mail: \_\_\_\_\_

<b>Licence No:</b> _____
<b>Allotment:</b> _____ <b>Plan:</b> _____ <b>Section:</b> _____
<b>Title Reference:</b> _____ <b>Hundred of:</b> _____
<b>Meter Number:</b> _____

Failure to provide complete details will result in your application being returned for completion.  
The prescribed fee must accompany this application form.

SIGNED BY THE APPLICANT: ..... DATE: .....

**Please make cheques and/or money orders payable to the Department for Environment and Water**

**RETURN APPLICATION TO:**  
**Department for Environment and Water**  
**2 Wade Street, Berri**  
**PO Box 240**  
**BERRI SA 5343**  
**Telephone Enquiries: (08) 8595 2053**

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