



FEE \$721.00
GST exempt
1/7/17-30/6/18
Form No. MAL03v14

MALLEE PRESCRIBED WELLS AREA

APPLICATION FOR VARIATION OF LICENCE ON ABSOLUTE (PERMANENT) OR LIMITED (TEMPORARY) TRANSFER OF ALLOCATION

Pursuant to Section 149(1)(a) 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.

1. APPLICANT DETAILS

Transferor (seller) Licence Number _____
(Transferring Licence)

Transferee (purchaser) Licence Number _____
(Receiving Licence)

Volume of water to be transferred _____ kilolitres

- Permanent** (absolute period), or
 Temporary (limited period) commencing 1 July _____ (write date) and
expiring on 30 June _____ (write date)

Total amount payable for the water (excluding land price): \$ _____

Section 12.48 of the Murray Darling Basin Plan 2012, requires the person disposing of the water to advise in writing the price agreed for the trade.

Section A – To be completed by Transferor (seller)

2. TRANSFEROR (SELLER) DETAILS

Full Name(s) of applicants(s) _____

Contact Person _____ If body Corporate, ACN No _____

Contact Address _____

State _____ P/Code _____

Telephone: Home _____ Work _____

Mobile _____ Facsimile _____

E-mail: _____

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

3. ALLOCATION TRANSFER DETAILS

Provide details about the water resource and water allocation

Table3.1

MANAGEMENT ZONE	ALLOCATION PURPOSE (e.g. Irrigation, Industrial, Intensive Farming)	VOLUME IN KILOLITRES

4. REQUEST TO VARY LICENCE TO REMOVE LAND

If you no longer take and use water on land that is endorsed on you water licence, AND you want this land removed from your licence, provide details of the land to be removed in table 4.1 below.

Table4.1

CERTIFICATE OF TITLE (Volume & Folio)	LAND DESCRIPTION (Section &/or Allotment & Plan No. if Applicable)	HUNDRED

5. METER DETAIL

Provide details of any changes to meters that will occur as a consequence of this transfer by entering the relevant meter details in table 5.1 below.

Table 5.1

GPS CO-ORDINATES OF EXTRACTION (Eastings & Northings)	TITLE REFERENCE CT, CL OR CR VOLUME & FOLIO	METER NUMBER	REASON FOR CHANGE

6. METER READING:

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

Meter Number	Meter Reading

Section B – To be completed by Transferee (purchaser)

7. TRANSFEREE (PURCHASER) DETAILS

Full Name(s) of applicants(s) _____

Contact Person _____ If body Corporate, ACN No _____

Contact Address _____

State _____ P/Code _____

Telephone: Home _____ Work _____

Mobile _____ Facsimile _____

E-mail: _____

8. ALLOCATION TRANSFER DETAILS (PURCHASER)

8.1 Provide details about the water allocation

MANAGEMENT ZONE	ALLOCATION PURPOSE (e.g. Irrigation, Industrial, Intensive Farming)	VOLUME IN KILOLITRES

9. PROPERTY DETAILS

9.1 Provide details of the land where the water will be used

CERTIFICATE OF TITLE (Volume & Folio)	LAND DESCRIPTION (Section &/or Allotment & Plan No. if Applicable)	HUNDRED

9.2 Sketch a property layout map with North point. Include relevant water use crops, irrigation main lines, stockyards, buildings, meter sites and the points of extraction from the water resources.

Map 1 Layout Plan of Property

9.3 Provide details of crops and stock as appropriate

CROP TYPE	AREA IN HECTARES	IRRIGATION METHOD (e.g. Drip, Pivot, Overhead Sprinkler)	STOCK TYPE	STOCK NUMBERS	AREA OF WASHDOWN (In Square Metres)

10. WATER RESOURCES EXTRACTION DETAILS

10.1 Provide details of the existing or proposed extractions for the purpose of taking water

WELL NUMBER	GPS CO-ORDINATES OF EXTRACTION POINT (Eastings & Northings)	TITLE REFERENCE CT, CL OR CR (Volume & Folio)	LAND DESCRIPTION (Section &/or Allotment & Plan No. if Applicable, Hundred)

10.2 Provide further details regarding well extractions

EXISTING OR NEW WELL	DETAILS OF REPLACEMENT (if applicable)

11. WATER METER DETAILS (PURCHASER)

Provide location and details of any meters that will measure water taken as a consequence of this transfer by entering the relevant meter details in table 11.1 below.

Table 11.1

GPS CO-ORDINATES OF EXTRACTION (Eastings & Northings)	TITLE REFERENCE CT, CL OR CR VOLUME & FOLIO	METER NUMBER	REASON FOR CHANGE

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 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.

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	

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 13: SIGNATURE OF THE 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.

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