



**L.4**

**RIVER MURRAY PRESCRIBED WATERCOURSE**

**Application for transfer of a Water Access Entitlement on Transformation of an Irrigation Right**

Pursuant to Sections 150 & 169A of the *Natural Resources Management Act 2004*, Section 32 of the *Irrigation Act 2009* and Section 33 of the *Renmark Irrigation Trust Act 2009*.

**Note:** Failure to provide complete details and/or prescribed fee will result in your application being returned for completion

**Note:** If this application is approved, you will also need a *Water Resource Works Approval* to take water, and a *Site use Approval* to use the water.

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 Detail**

**Note:** The name(s) given below must be legal entities, as these will be the name(s) that will appear on a licence if this application is approved. If applying as a trustee please state the name of the trust.

**1.1. Transferor (Irrigation Trust) Details**

Licence Number

---

Full Name(s) of applicant(s)

---

Contact Person

If body Corporate, ACN No

---

Contact Address

---

Suburb

State

P/Code

---

Telephone

Mobile

---

E-mail

---

**1.2. Transferee (Irrigation Right Holder) Details**

Licence Number *(if existing)*

---

**Note:** If this application to transfer a water access entitlement is approved and the transferee does not have a current licence, a new licence will be issued.

Full Name(s) of applicant(s)

---

Contact Person

If body Corporate, ACN No

---

Contact Address

---

Suburb

State

P/Code

---

Telephone

Mobile

---

E-mail

---

**2. Water Access Entitlement Transfer Detail**

**2.1 Share Class**

Number of Shares

---

Share Class

Number of Shares

---



**For Office Use Only:**

Date Received \_\_\_\_\_

Amount Paid \$ \_\_\_\_\_

Area \_\_\_\_\_

Application No	Receipt No	Invoice No	Batch no

**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 3: SIGNATURE OF THE TRANSFEROR(S) (TRUST)**

**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

**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 4: SIGNATURE OF THE TRANSFEREE(S) (IRRIGATION RIGHT HOLDER)**

**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 of Environment, Water and Natural Resources

Return application and payment to:  
Department of Environment, Water and Natural Resources  
PO Box 240  
BERRI SA 5343

**Office Location:**

2 Wade Street  
BERRI SA 5343  
Telephone enquiries: (08) 8595 2053