



W.2 RIVER MURRAY PRESCRIBED WATERCOURSE

Application to vary a Water Resource Works Approval

Pursuant to Section 161 of the *Natural Resources Management Act 2004*

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 need a *Site Use Approval* to use the water, together with an appropriate *Water Allocation*.

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

Water Resource Works Approval Number	Contact Person
Telephone	Mobile
E-mail	

2 Variation Detail

2.1 Check nature of variation below and the complete the relevant sections.

NATURE OF VARIATION	COMPLETE SECTION(S)	
<input type="checkbox"/> Vary Approval Holder	3, 6 & 7	
<input type="checkbox"/> Vary water taking details	4, & 6	
<input type="checkbox"/> Vary condition(s)	5 & 6	

3 New Approval Holder Detail

Full Name(s) of applicant(s) _____

Contact Person	If Body Corporate, ACN No
Contact Postal Address	State P/Code
Telephone	Mobile
E-mail	

4 Water Extraction Detail

4.1 Provide details of the proposed works for the purpose of taking water

NOMINATED WORKS (EG. WATERCOURSE EXTRACTION POINT)	GPS CO-ORDINATES OF EXTRACTION POINT USING WGS-84 OR GDA94 DATUM (EASTINGS & NORTHINGS)	TITLE REFERENCE CT, CL OR CR VOLUME AND FOLIO	SECTION AND/OR ALLOTMENT	PLAN NUMBER (IF APPLICABLE) AND HUNDRED

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



4.2 Provide the location and details of any meters that will measure the volume of water taken

GPS CO-ORDINATES OF METER SITE USING WGS-84 OR GDA94 DATUM (EASTINGS & NORTHINGS)	TITLE REFERENCE CT, CL OR CR VOLUME AND FOLIO	EXISTING OR NEW*	METER NUMBER

*Note: if meter is new, a meter notification must be submitted in conjunction with this form

5 Vary a condition

5.1 Provide detail of the relevant condition(s)

CONDITION NUMBER (AS IT APPEARS ON THE APPROVAL)	STATE WHETHER YOU WANT A CONDITION TO BE ADDED, REMOVED OR VARIED	STATE THE REASON FOR THE REQUEST

5.2 If a new condition is requested, provide details below



6 Signatures of the applicant(s)

Note: Each approval holder must complete **one only** of the following alternatives.

I/We declare that the information provided on this application is true and correct

6.1 Where the approval is held by one or more persons:

Sign Here _____

Print Name _____ Date _____

Sign Here _____

Print Name _____ Date _____

6.2 Where the approval is held by a company or an incorporated association

Name of company or incorporated association

Sign Here _____

Name of authorised person _____

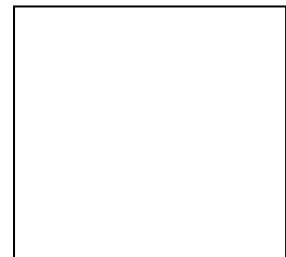
Position held _____ Date _____

Sign Here _____

Name of authorised person _____

Position held _____ Date _____

Affix seal in box



7 Signatures of the new Approval Holder applicants at section 3 above

Note: Each applicant must complete **one only** of the following alternatives.

I/We declare that the information provided on this application is true and correct

7.1 Where the applicant is one or more persons:

Sign Here _____

Print Name _____ Date _____

Sign Here _____

Print Name _____ Date _____

7.2 Where the applicant is a company or an incorporated association

Name of company or incorporated association

Sign Here _____

Name of authorised person _____

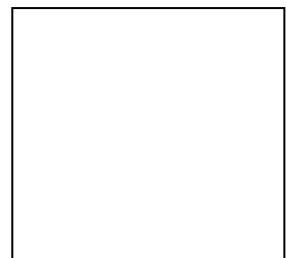
Position held _____ Date _____

Sign Here _____

Name of authorised person _____

Position held _____ Date _____

Affix seal in box



Please make cheques and/or money orders payable to: 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