



L.4

RIVER MURRAY PRESCRIBED WATERCOURSE

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

Pursuant to Sections 125 & 176 of the *Landscape South Australia Act 2019*, 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 *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.

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 \_\_\_\_\_

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 \_\_\_\_\_

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

Suburb \_\_\_\_\_ State \_\_\_\_\_ P/Code \_\_\_\_\_

Telephone \_\_\_\_\_ Mobile \_\_\_\_\_

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

For Office Use Only:

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

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

Area \_\_\_\_\_

Application No	Receipt No	Invoice No	Batch no



## 2. Water Access Entitlement Transfer Detail

2.1 Consumptive Pool

Share Class

Number of Shares

Consumptive Pool

Share Class

Number of Shares

Consumptive Pool

Share Class

Number of Shares

### 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.

**Note: If signing as a company, two position bearers must sign e.g. Director, Company 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	
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.

**Note:** If signing as a company, two position bearers must sign e.g. Director, Company 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  
PO Box 240  
BERRI SA 5343**Make cheques or money orders payable to:**  
Department for Environment and Water**For credit card payments or other payment options, please telephone:**  
(08) 8595 2053**Office Location:**  
28 Vaughan Terrace  
BERRI SA 5343