



**SOUTH EAST REGION**

**APPLICATION FOR VARIATION OF LICENCE ON ABSOLUTE (PERMANENT)  
OR LIMITED (TEMPORARY) TRANSFER OF FOREST WATER ALLOCATIONS**

*Pursuant to Section 169 of the Landscape South Australia Act 2019*

*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.*

**\* PLEASE NOTE the following details relevant to this application:**

- Unless advised otherwise by the Department a hydrogeological assessment will be required for the maximum fee above.
- In some South East Water Allocation Plans, temporary transfers to manage seasonal variability, transfers in management areas subject to reductions and the transfer of holding allocations are not subject to a hydrogeological assessment and therefore the lesser fee may apply (\*Other).
- Please contact the Department prior to lodging this application if you are unsure of the determined fee.
- Failure to provide full details or the prescribed fee may result in the return of the application and a delay in processing.
- The Minister may refuse to grant approval for an allocation transfer under section 132(4)(b) of the *Landscape South Australia Act 2019* until any water levy that has been imposed in relation to the licence has been paid.

**1. APPLICANT DETAILS**

**TRANSFEROR(S) (seller)**

Licence Number: \_\_\_\_\_

Licence Holder Name(s): \_\_\_\_\_

**Note:** Name(s) provided must be LEGAL ENTITIES and must be IN FULL as it appears on the licence.

If Body Corporate: ACN: \_\_\_\_\_

Postal Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Telephone No: \_\_\_\_\_

Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**TRANSFeree(S) (purchaser)**

Licence Number: \_\_\_\_\_

**Note:** if you do not hold a current Forest Water Licence you must apply to the Department for a new Forest Water Licence.

Licence Holder Name(s): \_\_\_\_\_

**Note:** Name(s) provided must be LEGAL ENTITIES and must be IN FULL as it appears on the purchasing licence.

If Body Corporate: ACN: \_\_\_\_\_

Postal Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Telephone No: \_\_\_\_\_

Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**For Office Use Only:**

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

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

Area: \_\_\_\_\_

Application No

Payment Method

Invoice No

Batch No

## 2. TRANSFER REQUEST AND DETAILS

I/WE HEREBY REQUEST THAT APPROVAL BE GIVEN FOR:

2.1 The LIMITED (**Temporary**) ☐ or ABSOLUTE (**Permanent**) ☐ transfer of \_\_\_\_\_ kL  
Of a **HOLDING** ☐ or **TAKING** ☐ allocation. Please tick required options.

Endorsed on LICENCE NUMBER: \_\_\_\_\_

Transferring to LICENCE NUMBER: \_\_\_\_\_

2.2 THE LIMITED (**Temporary**) Transfer period will:

COMMENCE: **1 July 2023** and EXPIRE **30 June:** \_\_\_\_\_ (write year)

**Note:** temporary transfers can only be up to a maximum of five years.

## 3. WATER USE

3.1 The PURPOSE OF USE of the transferred Allocation will be:

Forestry Water Allocation ☐ Taking Irrigation ☐ Industrial Use ☐ (Please tick required options)

3.2 If YES to Forestry, is the transfer to be used for an existing forest area? Yes ☐ or No ☐

3.3 If the transfer is to be used for a forest development, please attach a copy of the relevant development approval from Local Government

## 4. PROPOSED AREA AND SOURCE OF WATER SUBJECT TO TRANSFER

4.1 Proposed Source of Water: Unconfined Aquifer ☐ Confined Aquifer ☐ (please tick)

4.2 Is this allocation from another Management Area (MA): Yes ☐ or No ☐ (please tick)

If YES From: \_\_\_\_\_ MA to \_\_\_\_\_ MA

**Note:** Inter-Management Trade only applies to the Lower Limestone Coast Prescribed Wells Area.

## 5. PROPOSED WATER USE METHOD

What will be the method of application: forestry ☐ flood ☐ spray ☐ drip ☐ pivot ☐ sprinkler ☐  
travelling irrigator ☐ or other ☐ (please specify): \_\_\_\_\_

## 6. CONSENT TO CANCEL

Is this a Permanent Transfer where the transferor(s) Water Licence will be left with a zero balance? Yes ☐ or No ☐.

If YES does the transferor(s) give permission to cancel Water Licence No: \_\_\_\_\_

after the permanent water allocation transfer has been approved? Yes ☐ or No ☐

**Note:** Any allocation remaining on a cancelled licence will automatically be surrendered. Zero licences that consent to cancel will avoid future water levies.

## 7. TRANSFEROR(S) PROPERTY DETAILS

A transfer from an existing Forest Water Licence may only occur if the existing forest has been clear felled and if hardwood permanently killed.

Details of the land on which the forest allocation is currently situated: *(write details in the table below)*

CT or CL or CR (Volume and Folio)	Section	Allotment Number	Hundred	Plan Number	Forest Type	Forest Area (Hectares)	Date Clear felled	If Hardwood Date Killed *

If Hardwood Please Provide Details of Treatments applied

Chemical Used	Rate Applied	Application Method	% Killed

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Inspection Date:	% Killed:
Inspected By:	Permanently Removed: Yes/No.

## 8. TRANSFEREE(S) PROPERTY DETAILS

Details of the land on which the water allocation proposed to be transferred, is to be used: Certificate of Title References (*write details in the table below*)

CT or CL or CR Volume and Folio	Section or Allotment Number	Plan Number	Hundred	Management Area

TOTAL AMOUNT PAID OR PAYABLE FOR THE WATER (Excluding Land Price) \$ \_\_\_\_\_

**Note:** The sale of Water Licences are not subject to stamp duty. Please provide the amount paid for the water licence only excluding the land price.

**PLEASE COMPLETE SECTIONS 9, 10 & ATTACHMENT FOR FORESTRY ALLOCATIONS**

## 9. SITE OF EXISTING COMMERCIAL FOREST

Please attach ArcGIS compatible shape file and associated tables or attach a map and complete the table attached to the back of this form showing:

• Forest Type (Hardwood, Softwood, Carbon agreement) – separate layer for each	• Block name	• Certificate of Title Volume and folio number for each section
• Total Net Planted area (XX ha)	• Compartment numbers	• Compartment areas (X.X ha)
• Month & year of establishment, rotation number	• Coppice areas and date of coppice - if applicable	• Roads > 7 metres from tree to tree
• Number of thinnings completed	• If clear fell – month and year of clear fell	• Hectares < 6m to water table

NB: Net Planted Area: the area of the commercial forest measured from stump to stump, less any permanently unplanted areas greater than 0.1 hectare. Access tracks less than 7 metres wide are part of the planted area.

### ONGOING FOREST ALLOCATION

If this is a temporary transfer only, what is the plan for sourcing allocation to support this forest throughout its entire rotation?

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## 10. NEW FOREST DEVELOPMENT TIMETABLE

**Note:** The land upon which the allocation applies, must be developed in accordance with the approved Development Plan.

**PLEASE ATTACH A COPY OF THE APPROVED DEVELOPMENT PLAN**

The development listed in the table below for each year should indicate what you intend to complete within each twelve month period from date of granting of the allocation.

TIMETABLE OF DEVELOPMENT					
MONTH & YEAR E.g. May 18	DEVELOPMENT STAGES (E.g. area ripped and mounded, compartments 1 – 10 planted)	FOREST TYPE (Hardwood/ Softwood)	TOTAL AREA/S ESTABLISHED EACH YEAR IN HA.	STOCKING RATE (TREES /HA.)	DEEMED FORESTRY IMPACT PER YEAR (ML)*
<b>TOTAL</b>					
<b>TOTAL</b>					
<b>TOTAL</b>					

**Note:** The information you provide on the timetable may form the basis for certain conditions on a licence if this application is approved.

**PLEASE COMPLETE SECTION 11 IF TRANSFER IS FOR NON FORESTRY PURPOSES**

**11. WATER USE**

Please show the location of both the current & proposed water extraction points and use. This information will be used for the purpose of a Hydrogeological Assessment of your application.

**MAP LEGEND**



**EXISTING WELL LOCATION**



**PROPOSED WELL LOCATION**

On a drawn or provided map of the land parcel(s), please show the location of the proposed water use, extraction and infrastructure. (Do not show stock or domestic wells).

*Show property boundary and Section(s) numbers*



**12. ANY OTHER COMMENTS**

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### 13. OPTIONAL DELAYED REGISTRATION OF APPROVED TRANSFER

For absolute (permanent) transfers, the transferor may request a *delayed registration* transfer. This allows parties a period of two months from the approval date to arrange financial settlement prior to finalising the transfer. Within that two month window, a separate application must be submitted requesting that registration of the transfer on The Water Register take place. Should the application to register the transfer not be received within a period of two months, DEW will not register the transfer and the application will lapse.

☐ If approved, please delay registration of this transfer on The Water Register

**NOTE:** By ticking this box you acknowledge that the transfer will NOT be registered on The Water Register following approval of the transfer. To register this transfer, an application to register an approved transfer of a Water Licence or Water Access Entitlement on The Water Register must be submitted by the transferor (seller) within two months of the approval date.

**NOTE:** If this box is not ticked, registration of this transfer on The Water Register (if approved) will occur immediately subsequent to approval.

**NOTE:** This option is applicable to absolute (permanent) transfers only.

**ALL PARTIES TO THE TRANSFER MUST SIGN AND DATE THIS APPLICATION**

**ONLY ORIGINAL SIGNATURES WILL BE ACCEPTED**

**Note:** If signing as a company, two position bearers must sign e.g. Director, Secretary. If only one Director then Sole Director must be stated as position held.

**14. SIGNATURE OF THE TRANSFEROR(S) (the sellers):**

**Note:** Each transferor 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 the authorised person(s) duly authorised to sign for and behalf of the organisation:		
Name of company or Incorporated Association:		
Print Name:	Sign Here:	Date:
Position Held:		
Print Name:	Sign Here:	Date:
Position Held:		
3. Where the applicant is a company or an incorporated association and the Seal is affixed:		
The Seal of _____ [Write name of Company or incorporated association]		
was hereby affixed in the presence of:		Affix Seal in Box
Print Name:	Sign Here:	
Position Held:	Date:	
Print Name:	Sign Here:	
Position Held:	Date:	



**ALL PARTIES TO THE TRANSFER MUST SIGN AND DATE THIS APPLICATION**  
**ONLY ORIGINAL SIGNATURES WILL BE ACCEPTED**

**Note:** If signing as a company, two position bearers must sign e.g. Director, Secretary. If only one Director then Sole Director must be stated as position held.

**15. SIGNATURE OF THE TRANSFEREE(S) (the purchasers):**

**Note:** Each transferee 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:

<b>1. Where the applicant is an individual or two or more persons</b>		
Print Name:	Sign Here:	Date:
Print Name:	Sign Here:	Date:
Print Name:	Sign Here:	Date:
Print Name:	Sign Here:	Date:
<b>2. Where the applicant is a company or an incorporated association the authorised person(s) duly authorised to sign for and behalf of the organisation:</b>		
Name of company or Incorporated Association:		
Print Name:	Sign Here:	Date:
Position Held:		
Print Name:	Sign Here:	Date:
Position Held:		
<b>3. Where the applicant is a company or an incorporated association and the Seal is affixed:</b>		
The Seal of _____ <div style="text-align: center; margin-top: 5px;">[Write name of Company or incorporated association]</div>		
was hereby affixed in the presence of:		<b>Affix Seal in Box</b>
Print Name:	Sign Here:	
Position Held:	Date:	
Print Name:	Sign Here:	
Position Held:	Date:	
<b>Return this application and your cheque or money order to:</b> Department for Environment and Water 11 Helen Street Mount Gambier SA 5290   PO Box 1046 Mount Gambier SA 5290   <a href="mailto:DEW.LCWaterLicensing@sa.gov.au">DEW.LCWaterLicensing@sa.gov.au</a> <b>For credit card payments or other payment options, please telephone:</b> (08) 8735 1134		

**Attachment: FOREST WATER ALLOCATION TRANSFER DATA (please refer to sections 9 & 10)**

<b>Applicant Name:</b>	<b>Postal Address:</b>	<b>Email Address:</b>	<b>Phone:</b>

[illegible]