



**SOUTH EAST REGION**

**NOTICE OF LAND TRANSFER OR ASSIGNMENT OF INTEREST UNDER A FOREST PROPERTY  
MANAGEMENT AGREEMENT WHERE THE PROPERTY IS SUBJECT TO A FOREST WATER LICENCE  
WHERE THE LICENSEE IS NOT THE LAND OWNER**

*Pursuant to Section 166 (6) or (7) of the Landscape South Australia Act 2019.*

*The transferee or assignee is required to notify the Minister within 21 days, when a land transfer or interest assignment has occurred.*

*A person who furnishes information to the Minister or other 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.*

- **Note:** 166 (6) requires that when the ownership of land covered by a Forestry Water Licence is transferred, the transferee is required to furnish the Minister with notice of the transfer.
- **Note:** 166 (7) requires that when interest conferred by a forestry vegetation agreement, under the *Forest Property Act 2000*, is assigned to another person, the assignee is required to furnish the Minister with notice of assignment.
- **Note:** This form constitutes notice under 166 (6) and (7), where the Licensee is not the Land Owner. Where the Licensee is the Landowner an Allocation transfer form is required.
- **Note:** Failure to provide full details may result in the return of the application and a delay in processing.

**1. NOTIFICATION DETAILS**

**CURRENT LAND OWNER(S)**

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: \_\_\_\_\_

Current Land Owner Name(s) (in full): \_\_\_\_\_

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

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

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

**NEW LAND OWNER(S)**

New Land Owner Name(s) (in full): \_\_\_\_\_

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

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

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

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

**For Office Use Only:**

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

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

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

Application No

Receipt No

Invoice No

Batch No

## 2. PROPERTY DETAILS

Details of the land on which the forestry allocation is situated: Certificate of Title References (write details in the table below or supply a detailed list).

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

## 3. FOREST MANAGER DETAILS

Forest Manager Name (in full): \_\_\_\_\_

\_\_\_\_\_

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

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

\_\_\_\_\_

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

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

## 4. ANY OTHER COMMENTS

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## 5. SIGNATURE OF THE LICENSEE (the Notifier) ONLY ORIGINAL SIGNATURES WILL BE ACCEPTED

**Note:** The Notifier 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 _____		Affix Seal in Box
[Write name of Company or incorporated association]		
was hereby affixed in the presence of:		
Print Name:	Sign Here:	
Position Held:	Date:	
Print Name:	Sign Here:	
Position Held:	Date:	
<p><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</p>		