

FEE \$ 859.00 GST exempt 01/07/23 - 30/06/24

Form No: WMLR03v14

WESTERN MOUNT LOFTY RANGES PRESCRIBED WATER RESOURCES AREA

APPLICATION FOR VARIATION OF LICENCE ON ABSOLUTE (PERMANENT) OR LIMITED (TEMPORARY) TRANSFER OF ALLOCATION

Pursuant to Section 124 of the Landscape South Australia Act 2019

Western Mount Lofty Ranges Prescribed Water Resources Area includes the Western Mount Lofty Ranges Prescribed Watercourses, Western Mount Lofty Ranges Prescribed Wells Area and Western Mount Lofty Ranges Surface Water Prescribed Area

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.

SECTION 1: APPLICANT DETAILS	– Transferor (Se	eller)		
Full Name(s) of applicant(s)				
Full Name(s) of applicant(s)				
Full Name(s) of applicant(s)				
Full Name(s) of applicant(s)				
If Body Corporate: ACN		Water Licence N	0.	
Contact Name				
Address				
Town/Suburb			State	Postcode
Home Phone	Work Phone		Mobile Phone	
Email			·	
APPLICANT DETAILS - Transfere	e – (Buyer)			
Full Name(s) of applicant(s)				
Full Name(s) of applicant(s)				
Full Name(s) of applicant(s)				
Full Name(s) of applicant(s)				
If Body Corporate: ACN		Water Licence No		
Contact Name				
Address				
Town/Suburb			State	Postcode
Home Phone	Work Phone		Mobile Phone	
Email				
For Office Use Only:	Application No	Receipt No	Invoice No	Batch No
Date Received:				
Amount Paid: \$				
Area:				

SECTION 2: A	ABSOLUTE (F	PERMA	ANENT) / LIMI	TED (TEMPO	DRARY)) TRANSFE	R REQUES	ST AND	DETAILS
WE HEREBY REC	QUEST THAT A	PPROV	AL BE GIVEN FOR	THE ABSOLUT	E/LIMIT	ED TRANSFE	R (delete w	hichever (does not apply)
Of		kilolitre	S						
ENDORSED ON	ENDORSED ON WATER LICENCE NUMBER:TO WATER LICENCE NUMBER:								
IF TO A NEW W	IF TO A NEW WATER LICENCE IS TO BE ISSUED, PLEASE TICK THIS BOX:								
THE LIMITED TR	ANSFER BEING	G FOR A	PERIOD (comple	ete only if relev	vant)				
COMMENCING	ON: 01/07/		(write year)						
EXPIRING ON: 30 / 06 /(write year)									
Note: limited transfers will have effect for a full licence year, eg 1 July to 30 June.									
It is the transferor's responsibility to ensure sufficient allocation remains to cover the usage on their licence. Total amount paid or payable for the water \$ (excluding land price)									
SECTION 3: D	ETAILS OF I	NTITL	EMENT TRAN	SFERRED – 1	TRANSI	FEROR (S	ELLER)		
Provide detail	s about the s	ource(s) of water and	d water used	for irrig	ation			
Water Re (e.g. undergrou water, wate	ound, surface (e.g. well, dam.		No. g. well, dam,	Allocation to be transferred (kL)		Title Reference Volume & Folio No. where located		Purpose	
SECTION 4: SALINITY DETAILS – TRANSFEROR (SELLER) If you have undertaken salinity sampling in the 12 month period prior to submission of this application, please provide a salinity reading for all wells from where the water will be transferred:									
	Salinity		Date of	i de transferret		Niversit	Salin	ity	Date of
Well Number	(milligrams,	/litre)	sample		Well	Number	(milligran	ns/litre)	sample

SECTION 5: N	METER READINGS	– TRANSFEROI	R (SELLER)			
Date of Reading	Meter Number	Meter Reading		Date of Reading	Meter Number	Meter Reading

5.1 Provide details about t	the source/s of water	and water used for	irrigation	
Water Resource (e.g. underground, surface water, watercourse)	Water Source/Well No. (e.g. well, dam, watercourse)	Allocation to be transferred (kL)	Title Reference Volume & Folio No. Where located	Purpose

SECTION 7: S	ALINITY DETAILS -	- TRANSFEREE	(BUYER)			
	ndertaken salinity s ity reading for all we				nission of this appli	cation, please
Well Number	Salinity (milligrams/litre)	Date of sample		Well Number	Salinity (milligrams/litre)	Date of sample

SECTION 8: LAND W	HERE WATER IS TO B	E USED		
Title Reference Volume and Folio Number	Allotment Number	Plan Number	Section	Hundred
SECTION 9: OTHER	INFORMATION			
This section is optional.	Please include any addition	onal information to suppo	rt your application	
SECTION 10: OPTIO	NAL DELAYED REGIST	RATION OF APPROVE	ED TRANSFER	
period of two month that two month wind Water Register take months, DEW will no	nent) transfers, the transfers from the approval date to dow, a separate application place. Should the application tregister the transfer and please delay registration	to arrange financial settler n must be submitted requion to register the transfel I the application will lapse	ment prior to finalising the lesting that registration of r not be received within a	e transfer. Within the transfer on The
approval of the trans	s box you acknowledge tha sfer. To register this transf ment on The Water Regist	er, an application to regist	ter an approved transfer o	of a Water Licence or
NOTE: If this box is n subsequent to appro	oot ticked, registration of the oval.	his transfer on The Water	Register (if approved) wil	l occur immediately
NOTE: This option is	applicable to absolute (pe	ermanent) transfers only.		

Page 4 of 6

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 11: SIGNATURE OF THE APPLICANT – TRANSFEROR (SELLER)

Signature

Print Name

Position held

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, Secretary. If only one Director then Sole Director must be stated as position held. Where the applicant is an individual or two or more persons **Print Name** Date Sign Here **Print Name** Sign Here Date **Print Name** Sign Here Date Print Name Sign Here Date 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 Date Signature The person(s) duly authorised to sign for and on behalf of: (print name of company or incorporated association) 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

Date

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 12: SIGNATURE OF THE APPLICANT – TRANSFEREE (BUYER)

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.

be stated as position held.	irers must sign e.	g. Director, se	cretary. If only one	Director then sole Director must		
Where the applicant is an individual o	r two or more pe	rsons				
Print Name	Sign Here			Date		
Print Name	Sign Here			Date		
Print Name	Sign Here			Date		
Print Name	Sign Here			Date		
Where the applicant is a company or a organisation	n incorporated a	association and	d authorised persons	s sign on behalf of the		
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 or	hohalf of					
(print name of company or incorporated associated						
3. Where the applicant is a company or a			the seal is affixed:			
The Seal of: (print name of company or incorpor	ated association)					
was hereby affixed in the presence of:						
Signature			4	Affix Seal Here:		
Print Name						
Position held	Date					
Signature						
Print Name						
Time Name						
Position held	Date					
	Date					
Position held	Date		Office Legation			
Position held Return application and payment to:	Date		Office Location:	· entre		
Position held	Date		Office Location: Customer Service (81-95 Waymouth S			
Return application and payment to: Department for Environment and Water	Date		Customer Service (
Return application and payment to: Department for Environment and Water GPO Box 1047 ADELAIDE SA 5001	Date		Customer Service (81-95 Waymouth S ADELAIDE SA 5000	itreet		
Return application and payment to: Department for Environment and Water GPO Box 1047	Date		Customer Service (81-95 Waymouth S ADELAIDE SA 5000			