



APPLICATION FOR VARIATION OF LICENCE

Pursuant to Section 124 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 tick:

- Eastern Mount Lofty Ranges PWRA** **Marne Saunders PWRA**
 Barossa PWRA **Clare Valley PWRA**

SECTION 1: APPLICANT DETAILS			
Full Name(s) of applicant(s):			
Water Licence Number:			
If Body Corporate: ACN			
Contact Name			
Address			
Town		State	Postcode
Home Phone	Work Phone	Mobile Phone	
Email		Fax	

SECTION 2: ADD/REMOVE LAND PARCELS					
Title Reference Volume and Folio number	Allotment Number	Plan Number	Section	Hundred	Add / Remove (please specify)

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

SECTION 3: ADD/REMOVE WATER SOURCE(S)

Provide details about 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)	Meter number	Title Reference Volume & Folio No.	Add / Remove (please specify)

Aquifer Test Report attached

SECTION 4: VARIATION(S) TO CONDITION(S)

This section is optional. Please include any additional information to support your application

SECTION 5: ANY OTHER VARIATION

This section is optional. Please include any additional information to support your application

You may be required to provide additional information before your application can be determined. If further information is required you will be advised. Please note that this application does not relieve the applicant from obtaining all other necessary approvals for the taking and use of water.

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 6: SIGNATURE OF THE APPLICANT

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.

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

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)

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