

# Application to replace interim water allocation due to part disposal of land

(Water Act 2000)

## Purpose of this Form

To apply for the replacement of an interim water allocation which has been surrendered to the State, due to part disposal of the land to which the interim water allocation was attached.

## PART A Original Interim Water Allocation Information

Supply the interim water allocation number which is to be replaced

Supply interim water allocation volume (if known)

Megalitres

## PART B Applicant Details

**Name** *Specify the full name of all persons applying for this licence*

  


If the applicant is a corporation please supply the ACN

**Attention (Optional)** *(eg, Principal, Secretary, Managing Director, etc)*

**Street Address**

  


State

Postcode

**Mailing Address** *All correspondence will be delivered to this address (if same as street address please write 'as above')*

  


State

Postcode

Country

*if not Australia*

**Contact Person's Details**

*(If different from above)*

Title

Mr

Mrs

Ms

Miss

Other

*please specify*

Given Name

Last Name

Preferred Phone

Alternate Phone

Facsimile

Email Address

<b>OFFICE USE ONLY</b>	Fee Received \$	Application
	Receipt No.	Client
	Registration Date / / Initials	Authorisation

OFFICE STAMP ONLY

## PART C Replacement Interim Water Allocation Information

For the replacement interim water allocation to be created by subdivision of the original, list the following: (Attach a separate schedule, if required)

1. Replacement interim water allocation volume  Megalitres per water year

2. Lot and Plan numbers of the land that the replacement interim water allocation will now attach to (if the original land has been subdivided, specify the new Lot on Plan numbers)

Lot	Plan	Lot	Plan
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

## PART D Source & Location of Water Specify the type of water and the location from which water is to be taken

Water in a watercourse, lake or spring Name

Channel or Pipeline Name

Underground subartesian water Aquifer Name  Target depth  metres

Lot	Plan	Adjacent to (✓)
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>

**NOTE:** If water is to be taken from a point on land within the bed and banks of the watercourse which cannot be properly described in terms of a Lot on Plan, enter the property description of the nearest adjacent land and tick the 'Adjacent to' (✓) box.

Sketch a plan showing the source and location where the water is proposed to be taken and used. Include property boundaries, Lot on Plan descriptions, existing water facilities (eg. pump, bore), and location of any channel, pipeline, watercourse, lake or spring



**PART E Comments***Provide any further comments or information that may be of assistance in assessing this application*


**PART F Declaration***All parties to complete and sign the declaration below*

I/We declare that the information contained in this application is true and correct.

**INDIVIDUAL**

Name	<input type="text"/>	Name	<input type="text"/>
Signature	<input type="text"/>	Signature	<input type="text"/>
Position/Title <i>(if applicable)</i>	<input type="text"/>	Position/Title <i>(if applicable)</i>	<input type="text"/>
Date	<input type="text"/>	Date	<input type="text"/>

*Attach separate sheet (or photocopy) if more than 2 signatures required***CORPORATION** *Executed for and on behalf of (Corporation)*

<input type="text"/>	ACN	<input type="text"/>	
By (Name)	<input type="text"/>	By (Name)	<input type="text"/>
Position	<input type="text"/>	Position	<input type="text"/>
Signature	<input type="text"/>	Signature	<input type="text"/>
Date	<input type="text"/>	Date	<input type="text"/>
Witnessed By	<input type="text"/>	Witnessed By	<input type="text"/>
Witness Signature	<input type="text"/>	Witness Signature	<input type="text"/>
Date	<input type="text"/>	Date	<input type="text"/>

## PAYMENT OPTIONS

### Application Fee

The prescribed application fee is payable at the time of application.

Please refer to the provided 'fee link' located on the departmental website to obtain the current fee for this form.  
<[www.nrw.qld.gov.au/water/management/application\\_forms.html](http://www.nrw.qld.gov.au/water/management/application_forms.html)>

### Payment by Cheque, Cash or EFTPOS

- Cheque - To be made payable to the **'Department of Environment and Resource Management'** and marked **'Not Negotiable'**.
- Cash - Cash is only a payment option when paying in person.
- EFTPOS - Payment facilities may vary between offices, please contact your local DERM office in advance.

### Payment by Credit Card Please print clearly

Please charge this payment to my (tick appropriate box)  Visa  Mastercard  American Express

Amount of Payment \$  .

Card Number

Expiry Date

Phone No.

Cardholder's Name

Cardholder's Signature

Date