

FEE \$ 859.00 ALL GST exempt 1/7/23 - 30/6/24 Form No. AP02v2

ADELAIDE PLAINS APPLICATION FOR TRANSFER OF WATER LICENCE OR PART OF A WATER LICENCE (NOT CHANGE IN PROPERTY OWNERSHIP)

Pursuant to Section 125 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 relevant prescribed wells areas because trade across the boundaries of these prescribed wells areas may be considered under the <u>Adelaide Plains Water Allocation Plan</u> , although one form per trade is still required:					
Northern Adelaide Plai		. —	y Creek PWA		
Central Adelaide PWA					
Please complete Sections 1 to 12 bel	ow and write N/A in sectic	ons not relevant to	your application.		
If there is insufficient space on this fo (not applicable if application relates to a n	rm, please indicate the total	al number of additi	onal pages attached		
In this document some fields are mar				submitted is	
insufficient and not provided in a time					
1. APPLICANT DETAILS					
TRANSFEROR - *Transferor's de	tails (Provide details in full	l – as they appear o	on the licence)		
Name 1:					
Name 2:					
Name 3:					
Name 4:					
If Body Corporate ACN		Licence Numbe	r		
Company Name Contact Nam			ame		
Address		•			
Town/Suburb			State	Postcode	
Home Phone	Work Phone		Mobile Phone		
Email					
-					
TRANSFEREE - *Name(s) of pote NOTES:	ential licence holder(s) – as	they are to appear	on the licence		
- The names provided must be le	gal entities.				
- If this application to transfer is	approved and the transfer	ree does not hold a	water licence, a new licen	ce will be issued.	
Name 1:					
Name 2:					
Name 3:					
Name 4:					
If Body Corporate ACN Licence Number (i			r (if applicable)		
Company Name Contact Name					
Address					
Town			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(s):					

2. TRANSFER REQUEST DETAILS
What is the nature of your transfer request?
Please indicate by ticking one of the boxes below.*
2.1 You are seeking an ABSOLUTE (PERMANENT) transfer of a water licence (or part of a water licence, i.e. not the total volume): NOTE: This may be between consumptive pools, provided the request adheres to the transfer principles of the Adelaide Plains Water Allocation Plan.
2.2 You are seeking a LIMITED (TEMPORARY) transfer of a water licence (or part of a water licence, i.e. not the total volume): NOTE: This can only be within the same consumptive pool and the request adheres to the transfer principles of the Adelaide Plains Water Allocation Plan.
3. ABSOLUTE (PERMANENT) TRANSFER OF A WATER LICENCE OR PART OF A WATER LICENCE
WE HEREBY REQUEST THAT APPROVAL BE GIVEN FOR THE ABSOLUTE TRANSFER OF kilolitres
ENDORSED ON WATER LICENCE NUMBER:
WATER LICENCE NUMBER:
OR PLEASE TICK THIS BOX IF YOU REQUIRE A NEW WATER LICENCE TO BE ISSUED:
COMMENCING ON: 01 / 07 /(write year)
Once you've completed this section, please go to Section 5.
4. LIMITED (TEMPORARY) TRANSFER OF A WATER LICENCE OR PART OF A WATER LICENCE
WE HEREBY REQUEST THAT APPROVAL BE GIVEN FOR THE LIMITED TRANSFER OF kilolitres ENDORSED ON WATER LICENCE NUMBER:
WATER LICENCE NUMBER:
OR PLEASE TICK THIS BOX IF YOU REQUIRE A NEW WATER LICENCE TO BE ISSUED:
FOR A PERIOD, 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.
5. AMOUNT PAID OR PAYABLE*
TOTAL AMOUNT PAID OR PAYABLE FOR THE WATER (EXCLUDING \$ LAND PRICE):

6. DETAILS OF WATER BEING TRANSFERRED – TRANSFEROR (Seller)

Note about Consumptive Pools: Please visit <u>Adelaide Plains WAP Consumptive Pools online map</u> on the Department's website to find out your relevant consumptive pool, which is generally dependent on the aquifer the wells are extracting from. Please note that limited (temporary) trade of water may only be within the same consumptive pool. **Alternatively please contact the Water Licensing team on (08) 8463 6876 to find out the consumptive pool for your licence.**

If the transferee is seeking water from either the T1 Northern Adelaide Plains or T2 Northern Adelaide Plains consumptive pools, then the transferor must be selling water from these respective consumptive pools and then only from an area of lower potentiometric surface (i.e. can only transfer out of the cone of depression within the same consumptive pool). Please see the latest groundwater status reports that display potentiometric surface maps:

- NAP PWA T1 Groundwater Status Report (Figure 5); and
- NAP PWA T2 Groundwater Status Report (Figure 5).

(Please provide the necessary details in the table below)

Origin of Water*	Well Number(s)*	Consumptive Pool*	Allocation to be transferred (kL)*	Purpose/ Managed Aquifer Recharge Scheme Name*
Native Underground Water				
Recharged Water ¹ Please enter spatial consumptive pool (e.g. T1 Regional)				

¹ Please submit the Risk Management and Monitoring Plan (amended if necessary) and water level/pressure monitoring of the injection well and other monitoring wells identified in the Risk Management and Monitoring Plan, as well as any other supporting information necessary to assess the proposed transfer on the basis of principle 50g of the Adelaide Plains Water Allocation Plan.

DETAILS OF WATER TO BE TAKEN SUBJECT TO THIS TRANSFER – TRANSFEREE (Buyer)

Note about Consumptive Pools: Please visit <u>Adelaide Plains WAP Consumptive Pools online map</u> on the Department's website, noting that dependent on consumptive pool and proposed volume of extraction from the transferee(s) well(s), a hydrogeological investigation report **may** be requested following initial assessment of this application.

Note about transferring recharged water to another Managed Aquifer Recharge Scheme: Supporting documents must be provided to enable an assessment, namely the Risk Management Monitoring Plan and all previous records (including annual reports and meter readings if available) of the total volume of water drained or discharged and subsequently extracted.

Please note that the assessment of the Risk Management and Monitoring Plan can be iterative in nature between the Department and the applicant and due to the time variables involved the expectation should be that the application process may take approximately two months.

process may take approximately two months.	
However if the supporting information submitted is application being returned/refused or placed on hol	insufficient and not provided in a timely manner, it could lead to your d.
Please indicate the total number of attachments:	

(Please provide the necessary details in the table below)

Consumptive Pool *				
GPS Coordinates of well(s) or proposed well(s)*^ (Easting and Northing)				
Well Number(s) for existing well*				
Purpose				
Title Reference* - Volume and Folio where extraction/recovery well(s) located				
	nter as part of a different MAR scheme <u>ALL</u> of the following otherwise please mark N/A			
Managed Aquifer Recharge Scheme Name				
Proposed Maximum Annual Recovery Volume (kL) per well that water is being transferred to				
Current Maximum Annual Recovery Volume (kL/yr)				
*Either: a) Environment Protection Act 1993 Licence Number (please attach a copy); or b) Landscape South Australia Act 2019 Permit Number				
^ If you need to drill/rehabilitate or replace a well, prior to this activity you must obtain a well construction permit. Please visit the Statewide permit forms page for more information: https://www.environment.sa.gov.au/licences-and-permits/water-licence-and-permit-forms/statewide				
COMMENTS				
8. OTHER INFORMATION				
Please include any additional information that you think will support your application.				

9. METER READING*

Please provide the transferor(s) (sellers) meter reading(s) with this application. This will assist in determining your application.

In relation to T1 Northern Adelaide Plains, T2 Northern Adelaide Plains, Kangaroo Flat and Managed Aquifer Recharge Consumptive Pools, in accordance with principle 50c of the <u>Adelaide Plains Water Allocation Plan</u>, if the transferor has multiple wells located across a range of potentiometric surface values the metered extraction, over up to the previous 10 years will be required to enable assessment.

Note about Potentiometric Surface Information: Please see the latest groundwater status reports that display potentiometric surface maps:

- NAP PWA T1 Groundwater Status Report (Figure 5); and
- NAP PWA T2 Groundwater Status Report (Figure 5).

(Please provide the necessary details in the table below)

Well Numbers	Meter Number	Date of Reading	Meter Reading

10. 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 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.

11. SIGNATURE OF THE TRANSFEROR (SELLER)*

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.

<u>Note</u>: 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.

stated as position held.					
Where the applicant is an individual or two or more persons					
Print Name	Ciam Hana		Data		
Print Name	Sign Here		Date		
Print Name	Sign Here		Date		
rint Name	Sign Here		Date		
Print Name	Sign Here		Date		
Filit Name	Sign Here		Date		
Print Name	Sign Here		Date		
Thic Name	Significie		Date		
2. Where the applicant is a company or an in	ncorporated associ	riation and authorised persons sign o	on behalf of the organisation		
2. There are applicant is a company of an in	poratea assoc	sacion and damented persons sign	or 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 be					
(print name of company or incorporated association	1)				
3. Where the applicant is a company or an in	ncorporated assoc	ciation and the seal is affixed:			
The Seal of: (print name of company or incorporated	d association)				
was hereby affixed in the presence of:					
Signature			Affix Seal Here:		
Print Name					
Position held	Date				
Signature					
Print Name					
Position held	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.

12. SIGNATURE OF THE 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.

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.					
4. Where the applicant is an individual or two or more persons					
Butus Name	Cian Hann			D-1-	
Print Name	Sign Here			Date	
Print Name	Sign Here			Date	
Print Name	Sign Here			Date	
Print Name	Sign Here			Date	
Print Name	Sign nere			Date	
Print Name	Sign Horo			Date	
Print Name	Sign Here			Date	
5. Where the applicant is a company or an ir	ncornorated assoc	ristion and auth	porised persons sign	on hohalf of the organisation	
5. Where the applicant is a company or an in	icoi poi ateu associ	Iduon and add	ioriseu persons signi	on bendir of the organisation	
Print Name of authorised person		Position held	Position held		
Signature		Date			
Print Name of authorised person		Position held			
Signature		Date			
The person(s) duly authorised to sign for and on bel	half of:				
(print name of company or incorporated association))				
6. Where the applicant is a company or an ir	ncorporated assoc	iation and the	seal is affixed:		
The Seal of: (print name of company or incorporated	d association)				
was hereby affixed in the presence of:					
Signature				Affix Seal Here:	
Signature				AIIIX Jeai Here.	
Print Name					
Fillt Name					
Position held	Date				
rosition neta	Date				
Cimpatring					
Signature					
Drivet Norma					
Print Name					
Position held Date					
Position neiu	Date				
Deticing application and naumont to			Office Location:		
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GPO Box 1047			81-95 Waymouth St		
ADELAIDE SA 5001			ADELAIDE SA 5000		
			= " !! DEM	B5W - 1 - 1 - 2	
			Email address: DEV	/waterlicensing@sa.gov.au	
Department for Environment and Water For credit card payments or other payment options, please telephone:					
(08) 8463 6876					