



CLARE VALLEY PRESCRIBED WATER RESOURCES AREA
APPLICATION FOR A PERMIT FOR WATER AFFECTING ACTIVITY
USE OF IMPORTED WATER IN THE CLARE REGION

Pursuant to Section 112 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.

1. APPLICANT DETAILS

Full Name(s) of applicant(s)			
OR			
Company Name			
ACN			
Contact Address			
Suburb	State	Postcode	
Contact Person			
Telephone:	Home	Work	
	Mobile	Facsimile	
E-mail:			

2. PROPERTY DETAILS, PURPOSE AND SOURCE OF WATER

Property details	Use	Area (ha)	Imported Water (ML)	
			Peak	Off-peak
Allotment and CT	e.g. vines	e.g. 10.0 ha	e.g. 5.0 ML	e.g. 5.0 ML

2.1 Additional information should be detailed on a separate sheet and attached. Please tick box ☐ if additional details are attached:

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

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 3: 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.

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 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)

3. 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