



G.17

Application to register transmission through devolution

Pursuant to Schedule 4 of the *Landscape South Australia Act 2019* and Regulation 39 of the *Landscape South Australia (Water Register) Regulations 2020*

Note: Failure to provide complete details will result in your application being returned for completion

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(s) Details

1.1 Please provide full name.

Full Name(s)

Contact Person

If Body Corporate, ACN

Contact Address

State

P/Code

Telephone

Mobile

E-mail

2 Designated entitlement or prescribed entitlement detail

NOTE: Designated entitlement means water access entitlement, a water allocation attached to a forest water licence or a delivery capacity entitlement. Prescribed entitlement means a water licence, a water allocation or a designated entitlement.

2.1 Please provide details of designated entitlement or prescribed entitlement

Designated water entitlement detail or prescribed entitlement number:

Full names(s) of water entitlement or prescribed entitlement holder:

Contact Person

If Body Corporate, ACN

Contact Address

State

P/Code

Telephone

Mobile

E-mail

3 Additional Information

Please provide the following additional information:

- 3.1 ☐ Copy of will
- 3.2 ☐ Certificate of death
- 3.3 ☐ Grant of Probate / Letters of Administration (if applying as executor of estate)
- 3.4 ☐ Other information (please specify): _____

For Office Use Only:

Area

Date Received

Application No



4 Details of person to whom the interest is devolved

NOTE: The interest in the prescribed entitlement or designated entitlement may be devolved to the personal legal representative or the beneficiary of the estate of the party named in Section 2 above.

4.1 Please provide details of the party to which the interest in designated entitlement or prescribed entitlement is to be devolved.

Full names(s) of party:

Contact Person

If Body Corporate, ACN

Contact Address

State

P/Code

Telephone

Mobile

E-mail

5. Signature(s) of the applicant(s)

Signature(s) of the applicant(s)

- I/We declare that the information provided on this application is true and correct.

Note: Each applicant must complete one only of the following alternatives: Sign as a person or Sign as a company. If signing as a company, two position bearers must sign e.g. Director and Secretary unless the Company has only one Director, in this instance a single signature is required (and Sole Director must be stated as position held).

5.1 Where the applicant is one or more persons:

Sign Here

Print Name

Date

Sign Here

Print Name

Date

5.2 Where the applicant is a company or an incorporated association

Name of company or incorporated association

Sign Here

Name of authorised person

Position held

Date

Sign Here

Name of authorised person

Position held

Date

Affix seal in box

Please make cheques and/or money orders payable to: Department for Environment and Water
For credit card payments or other payment options, please telephone the relevant regional office below.

RETURN APPLICATION VIA POST OR EMAIL TO:-

Berri: Department for Environment and Water 28 Vaughan Terrace, Berri PO Box 240 BERRI SA 5343 Telephone Enquiries: (08) 8595 2053 Email: DEWWaterTrade@sa.gov.au	Mount Gambier: Department for Environment and Water 11 Helen Street, Mt Gambier PO Box 1046 MT GAMBIER SA 5290 Telephone Enquiries: (08) 8735 1134 Email: DEW.LCWaterLicensing@sa.gov.au	Other Regions: Department for Environment and Water 81-95 Waymouth Street, Adelaide GPO Box 1047 ADELAIDE SA 5001 Telephone Enquiries: (08) 8463 6876 Email: DEWWaterlicensing@sa.gov.au
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