



SOUTH EAST REGION

**NOTICE OF LAND TRANSFER OR ASSIGNMENT OF INTEREST UNDER A FOREST PROPERTY
MANAGEMENT AGREEMENT WHERE THE PROPERTY IS SUBJECT TO A FOREST WATER LICENCE
WHERE THE LICENSEE IS NOT THE LAND OWNER**

Pursuant to section 166 (6) or (7) of the Landscape South Australia Act 2019.

The transferee or assignee is required to notify the Minister within 21 days, when a land transfer or interest assignment has occurred.

A person who furnishes information to the Minister or other 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.

- **Note:** 166 (6) requires that when the ownership of land covered by a Forestry Water Licence is transferred, the transferee is required to furnish the Minister with notice of the transfer.
- **Note:** 166 (7) requires that when interest conferred by a forestry vegetation agreement, under the *Forest Property Act 2000*, is assigned to another person, the assignee is required to furnish the Minister with notice of assignment.
- **Note:** This form constitutes notice under 166 (6) and (7), where the Licensee is not the Land Owner. Where the Licensee is the Landowner an Allocation transfer form is required.
- **Note:** Failure to provide full details may result in the return of the application and a delay in processing.

1. NOTIFICATION DETAILS

CURRENT LAND OWNER(S)

Licence Number: _____

Licence Holder Name(s): _____

Note: name(s) provided must be LEGAL ENTITIES and must be IN FULL as it appears on the licence.

If Body Corporate: ACN: _____

Current Land Owner Name(s) (in full): _____

Postal Address: _____

Contact Name: _____ Telephone No: _____

Mobile: _____ Fax: _____ Email: _____

NEW LAND OWNER(S)

New Land Owner Name(s) (in full): _____

If Body Corporate: ACN: _____

Postal Address: _____

Contact Name: _____ Telephone No: _____

Mobile: _____ Fax: _____ Email: _____

For Office Use Only:

Date Received: _____

Amount Paid: \$ _____

Area: _____

Application No

Receipt No

Invoice No

Batch No

2. PROPERTY DETAILS

Details of the land on which the forestry allocation is situated: Certificate of Title References (write details in the table below or supply a detailed list).

CT or CL or CR Volume and Folio	Section or Allotment Number	Plan Number	Hundred	Management Area

3. FOREST MANAGER DETAILS

Forest Manager Name (in full): _____

If Body Corporate: ACN: _____

Postal Address: _____

Contact Name: _____ Telephone No: _____

Mobile: _____ Fax: _____ Email: _____

4. ANY OTHER COMMENTS

5. SIGNATURE OF THE LICENSEE (the Notifier) ONLY ORIGINAL SIGNATURES WILL BE ACCEPTED

Note: The Notifier 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.

SIGNED:

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 the authorised person(s) duly authorised to sign for and behalf of the organisation:		
Name of company or Incorporated Association:		
Print Name:	Sign Here:	Date:
Position Held:		
Print Name:	Sign Here:	Date:
Position Held:		
3. Where the applicant is a company or an incorporated association and the Seal is affixed:		
The Seal of _____ [Write name of Company or incorporated association]		Affix Seal in Box
was hereby affixed in the presence of:		
Print Name:	Sign Here:	
Position Held:	Date:	
Print Name:	Sign Here:	
Position Held:	Date:	
Return this application and your cheque or money order to: Department for Environment and Water 152 Jubilee Highway East Mount Gambier SA 5290 PO Box 1046 Mount Gambier SA 5290 DEW.LCWaterLicensing@sa.gov.au For credit card payments or other payment options, please telephone: (08) 8372 7561 (Option 2)		