



SOUTH EAST REGION

REMOVE LAND/TITLE FROM FOREST WATER LICENCE

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

1. PROPERTY DETAILS

Details of the titles which are to be removed from Licence..... : Certificate of Title References (write details in the table below or supply a detailed list).

Table with 5 columns: CT or CL or CR Volume and Folio, Section or Allotment Number, Plan Number, Hundred, Management Area. The table contains 8 empty rows for data entry.

2. FOREST MANAGER DETAILS

Form with fields for: Forest Manager Name (in full), If Body Corporate: ACN, Postal Address, Contact Name, Telephone No, Mobile, Fax, Email.

**3. SIGNATURE OF THE LICENSEE
ONLY ORIGINAL SIGNATURES WILL BE ACCEPTED**

NOTE: The Licensee must complete one only of the following alternatives

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.

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

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 _____		Affix Seal in Box
[Write name of Company or incorporated association]		
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 PAYMENT TO: Department for Environment and Water 152 Jubilee Highway East Mount Gambier SA 5290 PO Box 1046 Mount Gambier SA 5290 Phone Enquiries: 08 8372 7561 (Option 2) Email: DEW.LCWaterLicensing@sa.gov.au		