

APPLICATION FOR PERMIT FOR A WATER AFFECTING ACTIVITY

DRAIN OR DISCHARGE WATER INTO A WATERCOURSE OR LAKE

Pursuant to Section 104 of the Landscape South Australia Act 2019

FEE \$71.50

1/7/26-30/6/27

FORM NO. EP2v26-27

GST Exempt

* Denotes mandatory information required. Failure to provide complete details of information or failure to pay the lodgement fee may result in a delay in processing this application.

1. *APPLICANT DETAILS		
Title: Mr ☐ Miss ☐ Ms ☐ Mrs ☐ Dr ☐ Other ☐ (please specify):		
*Name (in full):		
Company Name:	ACN:	
*Address:		
*Postal Address:		
*Phone:	Mobile:	Fax:
Email:		
2. * PROPERTY DETAILS (site of discharge)		
*Certificate of Title (CT):	or;	*Crown Lease or Crown Record:
*Allotment and/or Section: No:		
*Hundred:	*Postcode:	
*Plan ID Number:	Council Area:	
Street No. and Name:	Town:	
Property Name:	Watercourse Name:	
*Catchment Name:	***If the activity is on more than one property please attach details of other properties.***	
*PROPERTY OWNER DETAILS (if different from applicant)		
Title: Mr ☐ Miss ☐ Ms ☐ Mrs ☐ Dr ☐ Other ☐ (please specify):		
*Name (in full):		
*Company Name:	*ACN:	
*Address:		
*Postal Address:		
*Phone:	Mobile:	Fax:
Email:		

OFFICE USE ONLY		
Date received:	Permit Ref No:	Payment enclosed: Yes ☐ No ☐
Action officer:	Amount Paid:	Receipt No:

3.0 SOURCE OF WATER PROPOSED TO BE DRAINED OR DISCHARGED INTO A WATERCOURSE OR LAKE

3.1 *Description of proposed activity and purpose:

3.2 *Specify source of water proposed to be drained or discharged into a watercourse, wetland or lake.

3.3 *Provide details of the expected water quality of the proposed discharge water.

E.g. Salinity, pH, Turbidity, Temperature, Contaminants.

3.4 *Which of the following best describes the proposed discharge event, Please tick:

- | | |
|--|--|
| ☐ Single event | ☐ Multiple discharge short term |
| ☐ Long term event | ☐ Multiple discharge long term |
| ☐ Ongoing | ☐ Other _____ |

*Provide volume and duration details:

Duration date: FROM: _____ TO: _____
(day/month/year) (day/month/year)

Total discharge volume: _____ kilolitres or;

Total discharge volume per annum: _____ kilolitres.

3.5 Specify Rate of Discharge: _____ L/second.

4.0 DISCHARGE LOCATION(S) & RECEIVING WATER QUALITY

4.1 *Name/description of watercourse, wetland or Lake into which water is to be discharged into.

4.2 Is there surface water present in the receiving watercourse, wetland or lake? ☐ YES or ☐ NO

If **NO**, are there any permanent water bodies downstream that will receive water as a result of the proposed discharge? ☐ YES or ☐ NO

4.3 Provide details of the water quality of water in the receiving watercourse, wetland or lake:

5.0 DRAINAGE OR DISCHARGE METHOD

5.1 Description of discharge method and any structure proposed for construction:
(Please attach any details, works or engineering plans or reports)

5.2 Description of erosion control structures proposed:
E.g. Coir logs, rock chute, rip rap, vegetation, detention basin, dissipater.

5.3 Description of treatment method proposed:
E.g. Filtration, detention basin, sediment bag, settling tanks, chemical

6.0 OTHER APPROVALS

6.1 What approvals do you or your company have from other state or local government agencies to carry out the proposed activity?

7.0 ENVIRONMENTAL RISKS

- 7.1 Please identify risks to water quality, watercourse stability or water habitat associated with the proposed activity. This includes the excavation and stockpiling of rock, sand or soil during the works.

- 7.2 Describe how these risks will be mitigated

8.0 SITE PLAN

- 8.1 Please **draw or provide a plan** of your works/property/site showing the following information:

- Discharge site and works location(s)
- The precise location of the proposed discharge point on the property
- Property boundaries, buildings and roads
- GPS co-ordinates (if available)
- North arrow
- Watercourses, streams, wetlands, springs, soaks, dams, drainage lines, lakes, direction of water flow
- Other significant features (e.g. trees, vegetation, erosion, salt, hazards)

**Attach separate sheet if needed*

9.0 DECLARATION/SIGNATURE

Note: The applicant must complete ONE ONLY of the following options:

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

Signature_____ Print Name_____ Date_____

Signature_____ Print Name_____ Date_____

2. Where the applicant is a Company or an Incorporated Association

A person or persons duly authorised to sign for and on behalf of

(Name of Company or Incorporated Association)

Name(s)_____ Position_____

Signature _____ Date _____

LODGEMENT INSTRUCTIONS

Applications can be lodged by post to:

WAA Permit Application

Eyre Peninsula Landscape Board

PO Box 2916

PORT LINCOLN SA 5606

Or in person at:

Eyre Peninsula Landscape Board, Port Lincoln

86 Tasman Terrace

PORT LINCOLN SA 5606

For any enquiries, please call the Port Lincoln office (Ph: 08 8688 3200) and ask for assistance on a Water Affecting Activity permit

PAYMENT INSTRUCTIONS

Cheques and Money orders

Made payable to the **Eyre Peninsula Landscape Board** and crossed 'Not Negotiable', for the amount of \$71.50

Credit Card

Payments by credit card can be made in person.