

## Forward draw notification form

## Purpose of the form

This notification form must be sent prior to taking water under forward draw arrangements to notify the department that you are about to commence to take water under forward draw arrangements.

Water can be taken under forward draw arrangements only in the Don and Dee groundwater sub-area. This area has water sharing rules that detail the rules and conditions of taking water under forward draw arrangements.

A copy of the water sharing rules can be downloaded from the department's website at www.business.qld.gov.au.

Part A Licence details							
Specify the fu	Il name(s) of all holders of the water licence	e under which forwar	d draw will be taken:				
If the applicar	If the applicant is a corporation, please supply the ACN:						
Attention (Op	Attention (Optional) (e.g. Principal, Secretary, Managing Director, etc.)						
Street addres	s:						
Mailing addre	ss (if same as street address write 'as abov	/e'):					
Main contact	for this notification						
	The contact details provided will be used by the department for the purpose of communications under the <i>Water Act 2000</i> . The department may be required or authorised by legislation to disclose your information to other third parties.						
Full name:							
Preferred pho	one:	Alternative phone:					
Email:							
department for th	ent: Collection of information on this form is authorised the purpose of processing your notification. The department third parties. The information may be searchable, or	ment may be required or a	uthorised by legislation to disclose your				
	Application ref.						

**OFFICE USE ONLY** 

Client ref.

Authorisation ref.

Initials

Registration

Date

Part B Details of water licence								
Specify the water licence under which forward draw will be taken.								
Water licence reference	e:							
Nominal entitlement:								
Note: Refer to the release forward drawn.	vant water sharing rules	for more information on	the maximum volu	me of water that may be	!			
Part C Details of wor	rks and meter reads							
•	neter details for works th print a blank copy of this	_		ard draw. If there are m	ore			
Work reference	Meter serial no.	Meter reading	Date read	Time read				
				: am/	/pm			
				: am/	/pm			
				: am/	/pm			
				: am/	/pm			
Part D Declaration								
All intended holders to blank copy of this page	complete and sign the de, complete and attach.	leclaration below. If mor	re signature space i	s required, copy or print	а			
I declare that the inform	nation in this notification	and materials submitte	d in support is true	and correct.				
Individual								
Name:								
Signature:								
Position/Title (if applica	able):							
Date:								
Corporation Executed	I for and on behalf of							
Organisation name:								
ACN:								

By (name):
Position:
Signature:

Witnessed by:

Witness signature:

Date:

Date: