

## Water Act 2000 - Form W2F156

ABN 51 242 471 577

## Application for transfer of an associated water licence

Purpose of the forn
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The holder of an associated water licence may apply to transfer the licence to another entity under the <i>Water Act</i> 2000.			
Part A Associated water licence information			
Associated water licence reference:			
Part B Transferor details			
Specify the full name of the individual or entity applying for am	nendment of the associated water licence:		
If the transferor is a corporation, please supply the ACN:			
Attention (optional) (e.g. Principal, Secretary, Managing Director, etc.)			
Street address:			
Mailing address (if same as street address write 'as above'):			
Main contact for this application			
The contact details provided will be used by the department for the purpose of required or authorised by legislation to disclose your information to other third			
Full name:			
Preferred phone: Altern	native phone:		
Email:			

**Privacy statement:** Collection of information on this form is authorised by section 1250l of the *Water Act 2000* and will be used by the department for the purpose of processing your application. The department may be required or authorised by legislation to disclose your information to other third parties. The information may be searchable, disclosed to and used by the public as allowed, authorised or required by legislation.

	Application ref.	Fee received \$	
			Office
OFFICE USE ONLY	Client ref.	Receipt no.	Stamp
	Authorisation ref.	Registration Initials date	Only

Provide a copy of the mining lease and any other tenure documents as well as any additional comments or information that may assist with assessing this application. If insufficient space, provide additional information as an attachment.		
implete and sign the declaration below. If more signature omplete and attach.		
omplete and attach.  we do hereby apply for the transfer of the associated water		
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Part C Information

Part E Transferee details				
Specify the full name of the entity that is proposed to become the new associated water licence holder:				
If the transferee is a corporation, please supply the ACN:				
Attention (Optional) (e.g. Principal, Secretary, Managing	Director, etc.)			
Street address:				
Mailing address (if same as street address write 'as above'):				
Main contact for this application				
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 phone:	Alternative phone:			
Email:				
Part F Transferee declaration				
All intended holders to complete and sign the declaration blank copy of this page, complete and attach.  I/we do hereby apply for the transfer of the associated was	below. If more signature space is required, copy or print a			
information contained in this application and materials su				
Individual				
Name:	Name:			
Signature:	Signature:			
Position/Title: (if applicable)	Position/Title: (if applicable)			
Date:	Date:			
Corporation Executed for and on behalf of				
Organisation name:				
ACN:				
By (name):	By (name):			
Position:	Position:			
Signature:	Signature:			
Date:	Date:			
Witnessed by:	Witnessed by:			
Witness signature:	Witness signature:			
Date:	Date:			