



Water Act 2000 – Form W2F036

ABN 51 242 471 577

Application to amalgamate resource operations licences or distribution operations licences

Purpose of the form

The holder of a resource operations licence (ROL) or a distribution operations licence (DOL) may apply to amalgamate, into a single licence:

- the ROL with another ROL in the same water supply scheme or
- the DOL with another DOL in the same water supply scheme.

Attachments

The following must be attached to this application.

- Written consent of the holder of other licence(s) to be amalgamated.
- Any other supporting information where required.

For amalgamation of ROLs, where applicable:

- Written notice of evidence of a supply contract between the applicant and the holders of water allocations managed under the other ROL(s)
or
- Agreement in writing from the applicant that the applicant will enter into a supply contract with the holders of water allocations managed under the other ROLs(s) on the day the new ROL is granted.

For amalgamation of DOLs, if the application is completed by an approved nominee, the current infrastructure owner’s written consent must be attached to the application.

Part A Applicant details

Specify the full name of the licence holder:

If the applicant 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 *Water Act 2000*. The department may be required or authorised by legislation to disclose your information to other third parties.

Full name:

Preferred phone:

Alternative phone:

Email:

Privacy statement: Collection of information on this form is authorised by section 193 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.

OFFICE USE ONLY	Application ref.		Office Stamp Only
	Client ref.		
	Authorisation ref.	Registration Date / / Initials	

Part B Details of amalgamation

Select the type of licence. Tick one only

 Resources operations licence **OR** Distribution operations licence

Name of licence:

Name(s) of other ROL(s) or DOL(s) to be amalgamated with the licence listed above.

Note: A ROL cannot be amalgamated with a DOL. A DOL cannot be amalgamated with a ROL.**Part C Applicant declaration****All parties to complete and sign the declaration below.**

If more signature space is required, copy or print a blank copy of this page, complete and attach.

I/We declare that the information in the application and materials submitted in support is true and correct.

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: