



**Part C Description of land**

Specify the lot on plan numbers for the land over, under or adjoining where the activity will occur.

Lot	Plan	Lot	Plan

**Part D Source and location of water**

Specify the name of the watercourse, lake, spring or aquifer within which the flow of water is to be diverted or changed:

**Part E Proposed activity**

Describe how the course of flow will be diverted or changed. Attach additional information as required.

Attach a map showing the location of the activity. Include property boundaries, lot on plan descriptions, existing water facilities, and the location of the watercourse, lake, spring or aquifer.

**Part F Reason for interference**

Describe the reason for the proposed diversion or change to the course of flow.

**Part G Comments**

Provide any further comments or information that may be of assistance in assessing this application. Attach additional information to your application as required.

**Part H 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 contained in this application and materials submitted in support is true and correct.

**Individual**

Name:

Name:

**Electronic signature**

By ticking this box you agree to the use of an electronic signature to submit this form\*.

\*By submitting this form using your email address nominated in part A of this form, you will have provided an electronic signature.

If you do not wish to use an electronic signature, you must sign the form in the space provided below.

**Electronic signature**

By ticking this box you agree to the use of an electronic signature to submit this form\*.

\*By submitting this form using your email address nominated in part A of this form, you will have provided an electronic signature.

If you do not wish to use an electronic signature, you must sign the form in the space provided below.

Date:

Date:

Manual signature (optional):

Manual signature (optional):

Name:

Name:

**Electronic signature**

By ticking this box you agree to the use of an electronic signature to submit this form\*.

\*By submitting this form using your email address nominated in part A of this form, you will have provided an electronic signature.

If you do not wish to use an electronic signature, you must sign the form in the space provided below.

**Electronic signature**

By ticking this box you agree to the use of an electronic signature to submit this form\*.

\*By submitting this form using your email address nominated in part A of this form, you will have provided an electronic signature.

If you do not wish to use an electronic signature, you must sign the form in the space provided below.

Date:

Date:

Manual signature (optional):

Manual signature (optional):

**Corporation** Executed for and on behalf of

Organisation name:

ACN:

By (name):

By (name):

Position:

Position:

**Electronic signature**

By ticking this box you agree to the use of an electronic signature to submit this form\*.

\*By submitting this form using your email address nominated in part A of this form, you will have provided an electronic signature.

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**Electronic signature**

By ticking this box you agree to the use of an electronic signature to submit this form\*.

\*By submitting this form using your email address nominated in part A of this form, you will have provided an electronic signature.

If you do not wish to use an electronic signature, you must sign the form in the space provided below.

Date:

Date:

Manual signature (optional):

Manual signature (optional):