



# Department of Natural Resources, Mines and Energy

ABN 59 020 847 551

## Application for a riverine protection permit

Water Act 2000

<b>Purpose of the form</b>		
This form is used to apply for a permit to excavate, place fill or destroy vegetation in a watercourse, lake or spring.		
<b>Part A Applicant details</b>		
Specify the full names of all persons applying for this permit.		
If the applicant is a corporation, please supply the ACN:		
Attention (optional) (e.g. Principal, Secretary, Managing Director, etc.):		
Street address:		
Mailing address:		
<b>Main contact for this application</b> (this person will be the contact for all correspondence related to this application)		
Title: <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Other (specify)		
Full name:		
Preferred phone:	Alternative phone:	Facsimile:
Email:		
<input type="checkbox"/> Ticking this box is your consent to receive emails from the department including any notice, formal information or document relevant to, or regarding, your application or riverine protection permit.		

**Privacy statement:** The information being collected in this form will be used by this department for the purpose of processing your application for a riverine protection permit under the authority of Chapter 2, Part 4 of the *Water Act 2000*. Your personal details will be accessed only by authorised officers within this department and will not be disclosed to any other third party without your consent except where required by law. The information collected will be retained as required by the *Public Records Act 2002* and may be stored in a departmental database. More information on our privacy commitment can be found at [www.business.qld.gov.au](http://www.business.qld.gov.au).

<b>OFFICE USE ONLY</b>	Application ref.	Fee received \$	<b>Office Stamp Only</b>
	Client ref.	Receipt no.	
	Authorisation ref.	Registration Date      /      /      Initials	

<b>Part B Details of activity</b>					
Name of watercourse, lake or spring:					
Date activity is to commence:    /    /			Date activity is to conclude:    /    /		
<b>Location of activity</b>					
Specify the parcel description of the land on or adjoining the place from which the activity will take place.					
<b>Lot</b>	<b>Plan</b>	<b>Adjacent to (✓)</b>	<b>Lot</b>	<b>Plan</b>	<b>Adjacent to (✓)</b>
		<input type="checkbox"/>			<input type="checkbox"/>
		<input type="checkbox"/>			<input type="checkbox"/>
		<input type="checkbox"/>			<input type="checkbox"/>
<b>Part C Proposed activity</b>					
Specify the extent and nature of the proposed activity.					
<b>To excavate in the watercourse, lake or spring</b>					
Length (metres):			Width (metres):		
Depth (metres):			Total volume (metres <sup>3</sup> ):		
Type of material to be removed:					
<b>To place fill in the watercourse, lake or spring</b>					
Length (metres):			Width (metres):		
Depth (metres):			Total volume (metres <sup>3</sup> ):		
Type of fill to be used:					
<b>To destroy vegetation in the watercourse, lake or spring</b>					
Length (metres):			Width (metres):		
Total area (metres <sup>2</sup> or hectares):					
Type of vegetation to be destroyed:					
<b>Part D Purpose of activity</b>					
Describe in general terms the reason the proposed activity is to be undertaken.					
<b>Part E Method of operation</b>					
<input type="checkbox"/> Machinery		<input type="checkbox"/> Chemical		<input type="checkbox"/> Other (specify):	
<b>Part F Location of activity</b>					
Attach a plan showing the source and location where the water is proposed to be taken. Include property boundaries, lot/plan descriptions, existing water facilities (e.g. pump, bore), as well as the location of any watercourse, lake or spring.					

**Part G Adjacent owner approval**

If the applicant is not the registered owner of all land adjacent to the watercourse, lake or spring where the excavation, placement of fill or destruction of vegetation is proposed, written consent from all relevant adjacent landowners is required.

If more space is required, attach a separate sheet or photocopy with original signatures.

Lot	Plan	Full name of landowner	Signature	Date
				/ /
				/ /
				/ /
				/ /

**Part H Declaration**

All applicants to complete and sign the declaration below. If more signature space is required, print a blank copy of this page, complete and attach.

I/We declare that the information contained in this application is true and correct.

**Individual**

Name:	Name:
Signature:	Signature:
Position/Title: (if applicable)	Position/Title: (if applicable)
Date: / /	Date: / /
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: / /