



Department of
Natural Resources and Mines

Native Title Protection Conditions

Form 11 - Clause 11.1

This is an example of a notice required under the Native Title Protection Conditions. An alternate form that complies with the requirements of the Native Title Protection Conditions may be used instead. *The Department of Natural Resources and Mines, Queensland, has produced this form but takes no responsibility for any subsequent unauthorised changes to it.*

NOMINATED BODY NOTICE

PERMIT NO. _____ (Insert EP or MDL Number)

Purpose: This form may be used where an **Explorer** is required to provide written notice to the Native Title Party within **7 Business Days** from the grant of the Exploration Permit.

Definitions of some of the terms in this form are in Schedule 1 of the Native Title Protection Conditions.

To: (Insert Native Title Party Applicants or RNTBC)	
For and on behalf of: (Insert Native Title Claim)	
From: (Insert Explorer)	

The above Permit has been granted.

The **Native Title Party** must give the Explorer a written notice (Nominated Body Response Notice) signed by the Native Title Party Applicants or the RNTBC Directors, identifying the Nominated Body for the Native Title Claim and providing a contact address for the Nominated Body.

A Nominated Body is:

- a) a person; or
 - b) an association incorporated in accordance with the *Associations Incorporation Act 1981 (Qld)*; or
 - c) a corporation incorporated in accordance with the *Corporations Act 2001 (Cth)*; or
 - d) an Aboriginal corporation incorporated in accordance with the *Aboriginal Councils and Associations Act 1976 (Cth)*; or
 - e) the trustee of a trust;
- nominated by the Native Title Party.

The **Explorer** is not required to pay any amount under the Native Title Protection Conditions to the Nominated Body until a Nominated Body Response Notice is given to the Explorer.

Receipt Date is the date that the notice is delivered by hand, two business days after mailing with correct postage or upon successful transmission by facsimile by 5:00pm or the next day if sent after 5:00pm.

Explorer's Details	Explorer	Explorer's Representative (if applicable)
Name of Explorer or Name and Position of a Contact Person:		
Street Address:		
Postal Address:		
Telephone Number:	Office: Mobile:	Office: Mobile:
Facsimile Number:		
Email Address:		

Further comments if needed:

Dated this		Day of		20
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Signature of Explorer or Explorer's Representative (if applicable) _____
