



**Melbourne
Water**

RE-APPLICATION FORM AND CHECKLIST
FOR A
PERMANENT WATER ENTITLEMENT

PLEASE RETURN TO MELBOURNE WATER CORPORATION
BY POST: Melbourne Water Corporation
G P O Box 4342
MELBOURNE VIC 3001

If you require assistance with completing this application please contact
the Diversion Management Team on 131 722



Re-application for a Surface Water Licence Due to Cancellation

CHECKLIST

This checklist must be completed and returned as part of the Application to:
Melbourne Water Corporation G P O Box 4342 MELBOURNE VIC 3001

Office Use Only	Provided/ Complete	Applicants name:
<input type="checkbox"/>	<input type="checkbox"/>	The Application Form (pages 3 - 5) has been completed, signed, and is attached.
<input type="checkbox"/>	<input type="checkbox"/>	A copy of the current Certificate of Title/s (Registered Search Statement & plan) produced within the last three months. (A copy of title (Registered Search Statement) can be obtained from the titles office via the internet at www.land.vic.gov.au)
<input type="checkbox"/>	<input type="checkbox"/>	If the applicant is a Company, a copy of the current company extract (not more than three months old) ** A copy of your Company extract can be obtained from your solicitor or via the internet at www.asic.gov.au
<input type="checkbox"/>	<input type="checkbox"/>	If the applicant is not the owner of the property, evidence that shows that the applicant is the legal occupier of the land (lease agreement etc.)
<input type="checkbox"/>	<input type="checkbox"/>	If applicable, written permission from landowner where pumps/pipelines or other associated works are situated (i.e. crown land, council or neighbours)
<input type="checkbox"/>	<input type="checkbox"/>	Site Plan as per section 11 detailing: (1) Property. (2) Area. (3) Source of supply. (4) Location of pump site/s. (5) Allotments between source of supply and the property. (6) Allotment numbers of the property. (7) Existing Native Vegetation/Tree Cover. (8) Any dams. (9) Other general features.
<input type="checkbox"/>	<input type="checkbox"/>	If applicable, Works Licence application attached for new or modified works
<input type="checkbox"/>	<input type="checkbox"/>	Photos of the works area, extraction point/s and storages.
<input type="checkbox"/>	<input type="checkbox"/>	Payment of the relevant Application Fees
<input type="checkbox"/>	<input type="checkbox"/>	Payment Form (page 7) detailing method of payment completed and attached

The collection and handling of information will be consistent with the requirements of the Information Privacy Act 2000.

I declare and acknowledge that I have submitted the attached application in its entirety in accordance with the above checklist. I further acknowledge that if the application is incomplete it will be returned and will not be considered lodged with Melbourne Water.

Signature: Date: / /

Print name: Position:



OFFICE USE ONLY	MWC File Ref: ____ / ____ / ____
Diversion Officer signature: Date Received: Payment: \$	



RE-APPLICATION FOR A SURFACE WATER TAKE & USE LICENCE

(In whole or part) Water Act 1989 Section 62

Take & Use Licence No. BEE	0					
Melbourne Water File Ref: / /						

Volume being Reapplied for _____ Megalitres

1. Name of Current Licence Holder(s)

Please complete one of the options below. This must be the same name(s) that appear on the current licence.

Option 1 Please print in block letters

1. Title: (please circle) Mr / Mrs / Ms / Miss / Dr

Surname: _____ Given Names: _____

2. Title: (please circle) Mr / Mrs / Ms / Miss / Dr

Surname: _____ Given Names: _____

If more than two individual licensees please attach a separate page, listing all parties & signatures. All parties must sign Section 3 on this page.

Option 2

Company / Business/ Trading Name: _____

Company Contact Person: _____

Position held within Company
(e.g. Director / Secretary): _____

2. Contact Details of Licence Holder(s)

Please complete the contact details for the current Licence Holder.

Postal Address : _____

Suburb: _____ Postcode: _____

Telephone: _____ Mobile: _____

Facsimile: _____ Email: _____

3. Signature(s) and Declaration of Licence Holder(s)

I/we the undersigned certify that the information provided in this application is true and correct.

I/we understand that this information may be referred to other organisations and/or advertised as part of the application and assessment process or released if reasonably required by government business, requested by lawful orders, or in the public interest; particularly in regard to open disclosure of generally collected water entitlements.

Applicant's signature: _____ Date: / /

Please Print name: _____

PLEASE NOTE POSITION WITHIN COMPANY IF APPLICABLE (E.G. DIRECTOR / SECRETARY)

Applicant's signature: _____ Date: / /

Please Print name: _____

PLEASE NOTE POSITION WITHIN COMPANY IF APPLICABLE (E.G. DIRECTOR / SECRETARY)

If the applicant(s) is a company, a copy of the current company extract (not more than 3 months old) must be supplied with this application. The company must sign the application in accordance with the Corporations Act 2001. Under that Act, a company may execute a document without a common seal if the document is signed by two directors of the company, or a director and a company secretary of the company. Melbourne Water will not accept liability if this form is signed by a person who is not authorised to do so.

4. Licence Details

Please provide details of your use for assessment purposes

4.1 Licence details

Type of Licence (Please select one option)

- All Year Round Pumping Licence
- Winterfill Licence (Please specify)
- On-stream storage
- Off-stream storage:

Name of Waterway (i.e. Woori Yallock Ck): _____

Method of taking (select one)

- Direct extraction from waterway / drain.
- Direct extraction from an on-waterway storage dam.
- Extraction from a waterway / drain to fill an off-waterway storage dam / tank.
- Extraction with full return to waterway (Non-consumptive use).

4.2 Existing / Proposed use of water

Tick all that apply:

<input type="checkbox"/> Domestic / Residential Supply – No. of Houses to be serviced: _____ Garden Area: _____ Ha	
<input type="checkbox"/> Stock Watering - No. of Stock _____	Type of Stock _____
<input type="checkbox"/> Irrigation of: _____ Irrigated area: _____ Ha (e.g. Vineyard(s), sports oval(s), orchard, strawberries)	
<input type="checkbox"/> Power generation	<input type="checkbox"/> Other: _____ (Please specify)
<input type="checkbox"/> Industrial / commercial use _____ (Please specify)	

4.3 Property where water is used

- (i) Attach a copy of the Land Title for each property issued by the Titles Office and not more than 3 months old
- (ii) All Volume and Folio Numbers must be provided for each title where works will be situated or water will be used:

Property Address: _____			
Lot number(s)	Plan number(s) (LP / PS / TP)	Volume	Folio
a)		a) Volume:	Folio:
b)		b) Volume:	Folio:
c)		c) Volume:	Folio:
d)		d) Volume:	Folio:
Crown Allotment(s)	Section(s)	Parish	
a)		a) Volume:	Folio:
b)		b) Volume:	Folio:

5. Pump Details

Provide below the general information for your pump and offtake works. If the works are new or modified you need to complete a Works Licence Application form.

Is the pump: <input type="checkbox"/> Existing or <input type="checkbox"/> Proposed (<i>tick one</i>)			
Engine Type: Electric / Diesel / Petrol		Engine Output: _____ KW / HP	
Pump Manufacturer: _____	Suction size (mm)		Maximum flow rate: Litres / Hour
Pump Model: _____	Delivery size (mm)		Daily Extraction Rate (ML): ML / Day
Serial No. (if available): _____			
Location Description: _____			
Easting: E _____		Northing: N _____	

** If more than one pump, attach photocopy of page, mark as Pump 2 and attach to application

6. Storage Details

Provide below the general information for your dam or storage works. If the works are new or modified you need to complete a Works Licence Application form.

Is the dam or water storage: <input type="checkbox"/> Existing or <input type="checkbox"/> Proposed (<i>tick one</i>)	
Type of storage:	
<input type="checkbox"/> Dam / Lake <input type="checkbox"/> Natural or <input type="checkbox"/> Constructed Surface area: _____ m ² Max Wall height: _____ m Capacity: _____ Megalitres (ML) Location Description: _____ Easting: E _____ Northing: N _____	<input type="checkbox"/> Tank <input type="checkbox"/> Above Ground or <input type="checkbox"/> Below Ground <input type="checkbox"/> Concrete <input type="checkbox"/> Plastic <input type="checkbox"/> Fibreglass Other: _____ Dimensions (L x W x H): _____ Capacity: _____ Megalitres (ML) Easting: E _____ Northing: N _____
Total Storage Capacity Available: _____ Megalitres (ML)	

7. Additional Water Sources (if applicable)

Please provide details of any additional water sources proposed or existing that will be used in conjunction with the surface water licence:

<input type="checkbox"/> Roof run-off _____ ML	<input type="checkbox"/> Groundwater _____ ML	BEE No.: _____
<input type="checkbox"/> Potable / Town Water _____ ML	<input type="checkbox"/> Surface water _____ ML	BEE No.: _____

8. Plan of Site

Please provide a detailed site plan and attach it to the application.

Plan must include:

- (1) Property. (2) Area. (3) Source of supply. (4) Location of pump site/s.
- (5) Allotments between source of supply and the property. (6) Allotment numbers of the property.
- (7) Existing Native Vegetation/Tree Cover. (8) Any dams (9) Other general features.

Referrals & Other approvals

ABORIGINAL CULTURAL HERITAGE

Aboriginal places and objects can be found all over Victoria and are often near rivers, lakes, swamps and the coast. Aboriginal places and objects can also be found on private property. Aboriginal Affairs Victoria (AAV) works in partnership with landowners, land managers and Aboriginal communities to record, protect and manage these places and objects.

The Aboriginal Heritage Act 2006 requires that the discovery of Aboriginal cultural heritage places or objects on any public or private land in Victoria be reported to Aboriginal Affairs Victoria.

Landowners who suspect a discovery of cultural heritage on their land can find out what to do by visiting the webpage www.dpcd.vic.gov.au/indigenous/aboriginal-cultural-heritage/information-for-landowners.

The relevant Registered Aboriginal Parties must be contacted prior to the commencement of works on crown land to determine the existence of any aboriginal place objects and archaeological sites. For more information on the relevant contact please visit www.dpcd.vic.gov.au/indigenous/aboriginal-cultural-heritage/registered-aboriginal-parties.

CROWN LAND AND OTHER PARTIES LAND

In many places throughout Victoria, waterways and drains are located within crown reserves.

These pieces of land are normally managed by the Department of Sustainability and Environment but may be occupied or leased by other parties. In cases where the Applicant proposes to occupy or cross crown land with their works or pipelines then the Applicant must provide demonstrated evidence that they have, or will obtain, the relevant permission from the land manager.

In the case of crown land a Water Frontage or Crown Land Occupation Licence may be required from the Department of Sustainability and Environment.

Contact the Senior Land Use Planner, Crown Land Management, Port Phillip Region, Locked Bag 3000, Box Hill, 3128 or on 9296 4400.

Similarly applicants must be able to demonstrate the relevant consent of any third party or agency on whose land the pump or associated works are, or will be, located.

End of Application Form

DIVERSIONS MANAGEMENT APPLICATION PAYMENT FORM

To find out the current fees please contact the Diversion team: Phone 131 722
NOTE: APPLICATIONS CLOSE FOR THE CURRENT FINANCIAL YEAR ON 31 MARCH

To pay please complete and return with your application to:

Melbourne Water Corporation
 G P O Box 4342
 MELBOURNE VIC 3001

or fax (Credit Card payment only)
 Diversions Management Team on: Fax (03) 9712 2209

Applicant / Company name:(please print in block letters)

Address:(please print in block letters)

Take & Use Licence No. **BEE**

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Melbourne Water File Reference (if applicable): / /

Tick type of payment (✓)

<input type="checkbox"/>	Reapplication Fee	\$
<input type="checkbox"/>	Annual Fee <i>(if applicable)</i>	\$
TOTAL		\$

METHOD OF PAYMENT:

Tick method of payment (✓)

Cheque (please attach) **OR** Credit Card (fill in below)

CREDIT CARD DETAILS

Please tick appropriate card (✓)

MasterCard Visa

Card No.

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Expiry Date ____ / ____

Total \$ _____

 Cardholder's name
 (please print in block letters)

 Cardholder's signature

Office Use Only



Non GST Applicable - Item 1	D20333 - 1220	NA
Non GST Applicable - Items 2 & 3	D20333 - 1280	NA
GST Applicable - Item 4	D20333 - 1280	C