



Environmental Protection Act 1986
Environmental Protection Regulations 1987

APPLICATION TO TRANSFER OR AMEND A LICENCE, WORKS APPROVAL OR REGISTRATION

Licences, Works Approvals and Registrations can be transferred or amended. All transfers involve a new occupier taking ownership of the instrument and attract an administrative fee of two fee units. Change of occupier on a registration attracts an administrative fee of two units. An amendment to a licence, works approval or registration does not attract an administrative fee but may require additional fees to be paid in respect of increased emissions or discharges, or for a change in production or design capacity.

Completing all sections of this application form will help ensure the necessary information is being provided and assist in reducing the timeframe for assessment. This form should be appropriately signed.

Information submitted as part of this application may be made publicly available. Any information that you wish to be held in confidence, such as trade secrets or commercially valuable information is to be submitted in a separate appendix to the Department of Environment Regulation (DER). Whilst every effort will be made to keep the information in an appendix confidential, the information may be accessed through Freedom of Information legislation.

The occupier of premises is responsible for ensuring they obtain the required DER approvals, before the commencement of any works that need a works approval. Failure to obtain the relevant approval may place the occupier in breach of the Act and subject to the implementation of DER's Enforcement Policy.

An application will not be accepted for assessment until it is deemed "complete". Allow at least 4 weeks to process from the "accepted date". **Incomplete applications will be returned to the applicant.**

Please send completed applications to your local Department of Environment Regulation office:

REGIONAL LICENSING OFFICES

SOUTH COAST Albany Tel: (08) 9842 4567 Fax: (08) 9841 7105 Post: 120 Albany Hwy ALBANY WA 6330	SOUTH WEST Bunbury Tel: (08) 9725 4300 Fax: (08) 9725 4351 Post: PO Box 1693 BUNBURY WA 6231	GOLDFIELDS Kalgoorlie Tel: (08) 9080 5555 Fax: (08) 9021 7831 Post: PO Box 10173 KALGOORLIE WA 6432	KIMBERLEY Kununurra Tel: (08) 9168 4200 Fax: (08) 9168 2179 Post: PO Box 942 KUNUNURRA WA 6743
SWAN Booragoon Tel: (08) 9333 7510 Fax: (08) 9333 7550 Post: Locked Bag 33, CLOISTERS SQUARE WA 6850	MIDWEST Geraldton Tel: (08) 9964 0946 Fax: (08) 9921 5713 Post: PO Box 72 GERALDTON WA 6531	PILBARA Karratha Tel: (08) 9182 2000 Fax: (08) 9144 1118 Post: PO Box 835 KARRATHA WA 6714	WHEATBELT Northam Tel: (08)9621 3400 Fax: (08) 9621 3410 Post: 75 York Road NORTHAM WA 6401

1. APPLICANT DETAILS

Occupier Name (must be a legal entity): Trading as:	ACN/ARBN/ABN (as appropriate):
Postal Address:	Municipality (LGA):
Contact Person: Mobile: Phone: (08) Fax: (08) E-mail:	

2. AMENDMENTS REQUESTED FOR (please tick):

If more than one instrument requires amendment please complete individual forms

LICENCE <input type="checkbox"/>	WORKS APPROVAL <input type="checkbox"/>	REGISTRATION <input type="checkbox"/> (fees apply)
Number:		
File No:		
Expiry Date:		

3. TYPE OF AMENDMENT (please tick)

Please attach supporting documentation

Transfer to another company or person (fees apply)	<input type="checkbox"/>
Change of address	<input type="checkbox"/>
Change of location	<input type="checkbox"/>
Change to site boundaries	<input type="checkbox"/>
Change or addition of classification types	<input type="checkbox"/>
Correction of: <ul style="list-style-type: none"> • a clerical mistake or unintentional error or omission; • a figure which has been miscalculated; or • misdescription of any person, thing or property 	<input type="checkbox"/>
Administrative change	<input type="checkbox"/>
Change to a discharge point or emission point	<input type="checkbox"/>
Time extension (works approval only)	<input type="checkbox"/>
Removal or variation of any condition/s	<input type="checkbox"/>
Addition of a new condition/s	<input type="checkbox"/>
Change in conformity with an approved policy or prescribed standard	<input type="checkbox"/>
Change to Attachments	<input type="checkbox"/>
Change because of a decision of the Minister under the EP Act 1986 (whether on an appeal or otherwise);	<input type="checkbox"/>
Other (please specify)	<input type="checkbox"/>

4. TRANSFER DETAILS (if applicable)

Note: there is an administration fee of two (2) fee units for transfers to works approvals, licences and for a change of occupier of a registration. Previous address/ contact details are required where application is for transfer of works approval or licence. Previous address/ contact details are not required for an amendment. An applicant seeking to change the address of *the premises* will require a works approval.

Address and contact details		Old Details	New Details
Occupier ACN/ARBN/ABN			
Occupier Name (must be a legal entity)			
Trading name			
New details	Postal Address		
	Contact Person		
	Telephone		
	Facsimile		
	Email		
	24hr Emergency Contact	Name:	
	Phone:		

5. DETAILS OF OTHER CHANGES:

Briefly describe amendments requested or attach supporting documents

6. PRESCRIBED FEES

Fee calculator			
Applicable Dates	Single fee unit	Two fee units	Total Payable
1 July 2013 to 30 June 2014	\$30.40	2 x \$30.40	= \$60.80

The prescribed fee is \$_____

Payment or remittance advice must be included with the application.

The fee for transfers of licences, works approvals and for change of occupier of a registration is two fee units. There is no fee for amendments to licences or works approvals.

Cheques are to be made out to the **Department of Environment Regulation**. Credit Card payments are to be made using the **Credit Card Payment form**. This form is available on DER's website.

If you are paying by Electronic Funds Transfer (EFT) please provide the licence, works approval or registration number in the payment description.

EFTs are to be sent to:

Account Holder: Department of Environment Regulation

BSB: 066 040 Account: 113 000 06

7. CHECKLIST

For your application to be accepted all sections of the application form that are identified in this checklist must be complete.

Incomplete application forms can not be accepted and will be returned.

Applicant to tick <input type="checkbox"/>	Office Use Only Application Received ___/___/___ DER Officer _____
---	---

7.1 APPLICANT DETAILS		Complete	Comments
Name of person or company that is in occupation or control of the premises to which the application to transfer or amend a licence, works approval or registration relates <u>must</u> be supplied.	<input type="checkbox"/>	<input type="checkbox"/>	
If a company, an ABN number <u>must</u> be supplied.	<input type="checkbox"/>	<input type="checkbox"/>	
Premises address and municipality (LGA) <u>must</u> be completed.	<input type="checkbox"/>	<input type="checkbox"/>	
If a company a contact person <u>must</u> be supplied.	<input type="checkbox"/>	<input type="checkbox"/>	
7.2 AMENDMENTS REQUESTED FOR			
Identify the instrument to that requires transfer or amendment. The following details <u>must</u> be supplied:	<input type="checkbox"/>	<input type="checkbox"/>	
• Licence, works approval or registration number.	<input type="checkbox"/>	<input type="checkbox"/>	
• File number.	<input type="checkbox"/>	<input type="checkbox"/>	
• Expiry date.	<input type="checkbox"/>	<input type="checkbox"/>	
7.3 TYPE OF AMENDMENT			
Details of the type of amendment be requested <u>must</u> be supplied.	<input type="checkbox"/>	<input type="checkbox"/>	
Supporting documentation for all amendments that have been requested <u>must</u> be supplied.	<input type="checkbox"/>	<input type="checkbox"/>	
7.4 TRANSFER DETAILS (if applicable)			
If the application is for the transfer of a licence <u>or</u> works approval <u>or</u> registration, details of the old and new details <u>must</u> be provided.			
• Occupier ABN	<input type="checkbox"/>	<input type="checkbox"/>	
• Occupier Name	<input type="checkbox"/>	<input type="checkbox"/>	
• Postal Address	<input type="checkbox"/>	<input type="checkbox"/>	
• Contact Person (24hr emergency contact)	<input type="checkbox"/>	<input type="checkbox"/>	
• Telephone	<input type="checkbox"/>	<input type="checkbox"/>	
• Facsimile	<input type="checkbox"/>	<input type="checkbox"/>	
• Email (not mandatory)	<input type="checkbox"/>	<input type="checkbox"/>	
7.5 DETAILS OF OTHER CHANGES			
Briefly detail amendments requested or attach supporting documentation.	<input type="checkbox"/>	<input type="checkbox"/>	

7.6 PRESCRIBED FEES			
The prescribed fee is enclosed with the application OR remittance advice is enclosed with the application.	<input type="checkbox"/>	<input type="checkbox"/>	
8. APPLICANT'S SIGNATURE REQUIRED		Is the application complete? <input type="checkbox"/> Yes: Date application accepted ___/___/___ <input type="checkbox"/> No: Return application	
Surname:	Title:		
Other names:			
I certify that the information contained in this application (including attachments) is accurate. I understand further information may be required from me if necessary. I understand that under the <i>Environmental Protection Act 1986</i> section 112, a person who gives or causes to be given information that to their knowledge is false or misleading commits an offence.		Signature: Date:	