

This form is to be completed if you wish to amalgamate your licence with another licence.

Prior to the completion of this application you must read and understand the licence terms and conditions to "Take and Use" water from the Coliban Rural Water System.

Licences are issued for a maximum of 15 years.

A \$65.00 transfer fee applies to each application approved.

If you have any questions or concerns please contact our Rural Customer Service team on 1300 363 200.

## Section A: Details of current licence holder number one

### Name of applicant

(If more than two individual licensees please attach on a separate page – all parties listed must sign the declaration on this form.)

Title (please circle) Mr / Mrs / Ms / Miss / Dr

Given names: \_\_\_\_\_ Surname: \_\_\_\_\_

Title (please circle) Mr / Mrs / Ms / Miss / Dr

Given names: \_\_\_\_\_ Surname: \_\_\_\_\_

Or

Company / Business / trading name: \_\_\_\_\_

Company contact person: \_\_\_\_\_

Position held within company: \_\_\_\_\_

ABN: \_\_\_\_\_

### Licence details

Property ID: \_\_\_\_\_

BEE: (Bundled Entitlement Entity) \_\_\_\_\_

ABA: (Allocation Bank Account) \_\_\_\_\_

### Contact details

Postal address: \_\_\_\_\_

Town: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**Property details**

Property address: \_\_\_\_\_

Town: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Service points / outlet numbers: \_\_\_\_\_

\_\_\_\_\_

**Section B: details of current licence holder number two****Name of applicant**

(If more than two individual licensees please attach on a separate page – all parties listed must sign the declaration on this form.)

Title (please circle) Mr / Mrs / Ms / Miss / Dr

Given names: \_\_\_\_\_ Surname: \_\_\_\_\_

Title (please circle) Mr / Mrs / Ms / Miss / Dr

Given names: \_\_\_\_\_ Surname: \_\_\_\_\_

Or

Company / Business / trading name: \_\_\_\_\_

Company contact person: \_\_\_\_\_

Position held within company: \_\_\_\_\_

ABN: \_\_\_\_\_

**Licence details**

Property ID: \_\_\_\_\_

BEE: (Bundled Entitlement Entity) \_\_\_\_\_

ABA: (Allocation Bank Account) \_\_\_\_\_

**Contact details**

Postal address: \_\_\_\_\_

Town: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_



**Property details**

Property address: \_\_\_\_\_

Town: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Service points / outlet numbers: \_\_\_\_\_

\_\_\_\_\_

**Section C: the new Licence****Name of applicants**

(If more than two individual licensees please attach on a separate page – all parties listed must sign the declaration on this form.)

Title (please circle) Mr / Mrs / Ms / Miss / Dr

Given names: \_\_\_\_\_ Surname: \_\_\_\_\_

Title (please circle) Mr / Mrs / Ms / Miss / Dr

Given names: \_\_\_\_\_ Surname: \_\_\_\_\_

Or

Company / Business / trading name: \_\_\_\_\_

Company contact person: \_\_\_\_\_

Position held within company: \_\_\_\_\_

ABN: \_\_\_\_\_

**Contact details**

Postal address: \_\_\_\_\_

Town: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**Property details**

- Please attach a copy of the current Certificate of Title/s (Registered Search Statement and Plan) produced within the last three months or Notice of Acquisition/Disposition for all land/s.
- Please attach a map showing the general location of the property, boundaries, diversion points and dams. This can be a VicRoads, Melways or CFA map.



**Property description**

Property address: \_\_\_\_\_

Town: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Lot number(s): \_\_\_\_\_ Plan number(s): \_\_\_\_\_

Crown Allotment(s): \_\_\_\_\_ Section(s): \_\_\_\_\_ Parish: \_\_\_\_\_

Volume: \_\_\_\_\_ Folio: \_\_\_\_\_

Service points / outlet numbers: \_\_\_\_\_

\_\_\_\_\_

**Purpose** (please tick)

- |   |   |                                       |
|---|---|---------------------------------------|
| <input type="checkbox"/> Irrigation                               | <input type="checkbox"/> Dairy          | <input type="checkbox"/> Urban supply |
| <input type="checkbox"/> Domestic supply                          | <input type="checkbox"/> Stock watering |                                       |
| <input type="checkbox"/> Commercial (please specify) _____        |   |                                       |
| <input type="checkbox"/> Industrial Supply (please specify) _____ |   |                                       |
| <input type="checkbox"/> Other (please specify) _____             |   |                                       |

If you choose irrigation, stock watering, or domestic supply as your water use please complete the following:

Number of stock: \_\_\_\_\_ Type of stock: \_\_\_\_\_

Irrigation size: \_\_\_\_\_ Crop type and size: \_\_\_\_\_

**Volume**

What will be the total volume on the new amalgamated licence \_\_\_\_\_ ML

**Approvals / declarations**

- I/we have read and understand the licence terms and conditions to take and use water from the Coliban Rural Water System. Document available online at [www.coliban.com.au](http://www.coliban.com.au).
- I/we understand that the information provided on this form is true and correct. I/we are aware that it is an offence to supply false or misleading information.
- I/we are aware that Coliban Water may release information contained in this application, at the discretion of Coliban Water to relevant parties and organisations in accordance with the relevant legislation. Coliban Water protects your privacy by collecting and handling information in accordance with the requirements of the *Information Privacy Act 2000*.



Applicants signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please print name: \_\_\_\_\_  
(Please note position within company if applicable)

Applicants signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please print name: \_\_\_\_\_  
(Please note position within company if applicable)

## Submitting the form

Please mail the completed and any required attachments:

Rural Customer Service Team  
Coliban Water  
PO Box 2770  
BENDIGO DC VIC 3554

### *Checklist:*

- *Complete all sections of the form.*
- *Payment of \$65.00 administration fee.*
- *A current Certificate of Title/s or Notice of Acquisition/Disposition for all land/s.*
- *A map showing the general location of the property, boundaries, diversion points and dams. This can be a VicRoads, Melways or CFA map.*