

# APPLICATION FORM

## Critical Water Allocations



**APPLICATION FORM**

**Application for a Critical Water Allocation to provide an advance on future restricted water allocation improvements where the current restricted water allocation is insufficient to keep permanent plantings alive.**

**Application checklist**

The following information is required and will assist administrators to process the application quickly.	
Business tax returns for 2004–05, 2005–06 and 2006–07 including profit and loss statements and balance sheets for the farm business.  Note: if you have applied for an EC Interest Rate Subsidy you do not need to resubmit your business tax returns, profit and loss statements and balance sheets for the farm business.	<input type="checkbox"/>
Completed application form signed by the business owners.	<input type="checkbox"/>

**Closing date: 16 January 2009**

**1. APPLICANT'S DETAILS**

Do you have more than one licence? Yes  No   
(attach application for each licence)

Are you a private irrigator? Yes  No

If yes, what is your licence no: \_\_\_\_\_

Full name of licensee: \_\_\_\_\_  
\_\_\_\_\_

Are you a member of an irrigation trust? Yes  No

If yes, what is your Irrigation Trust? \_\_\_\_\_

What is your Trust account number? \_\_\_\_\_

Have you sold any of your current licence? Yes  No

Farm business name: \_\_\_\_\_

ABN:

(The applicant requires an ABN and registration for GST)

**2. CONTACT DETAILS**

Name: \_\_\_\_\_  
 Postal address: \_\_\_\_\_  
 \_\_\_\_\_ Postcode \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Mobile: \_\_\_\_\_  
 Email \_\_\_\_\_

**3. FARM BUSINESS OWNERS** (List all proprietors, directors or trustees)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**4. EXCEPTIONAL CIRCUMSTANCES APPLICATION**

Have you been approved for an Exceptional Circumstances interest rate subsidy in SA?

Yes  No

**5. DETAILS OF CROPS**

Total area of all crops (permanent and non-permanent) \_\_\_\_\_hectares  
 Area of permanent plantings \_\_\_\_\_hectares  
 Area of permanent plantings requiring a Critical Water Allocation \_\_\_\_\_hectares

***For office use only:***

Area of permanent plantings that qualify for Critical Water Allocation \_\_\_\_\_hectares  
 Percentage of total area that qualifies for Critical Water Allocation \_\_\_\_\_%

**6. VOLUME OF CRITICAL WATER SOUGHT**

Crop type and area (ha) x survival volume (ML/ha) = critical survival need (ML).

Critical survival need (ML) – restricted water allocation at time of allocation (entitlement volume at 1 July 2008 ML x % in Notice of Restriction) = Critical Water Allocation (ML)

Full entitlement at 1 July 2008 **(G)**: \_\_\_\_\_ KL

Current restricted water allocation percentage **(H)**: \_\_\_\_\_%

NOTE: Any carry-over water allocated or traded, or any temporary 'top-up' water (taking) allocations or entitlements traded in to the licence in 2008–09 are not included in the restricted water allocation.

Crop type	Hectares	Critical survival need (ML/ha)	<b>(A)</b> Critical survival need (ML)	<b>(C)</b> Applicable entitlement Factor	<b>(D)</b> Entitlement to be subtracted	<b>(E)</b> CWA required (ML)
<b>(B) Total =</b>				<b>Total critical water sought (ML) =</b>		

**(A) = Critical survival need (ML/ha) x Hectares**

**(C) = ((A) ÷ (B)) x 100**

**(D) = (C) x ((G) x (H)% ÷ 1,000)**

**(E) = (A) – (D)**

**Total Volume of critical water sought \_\_\_\_\_ kilolitres**

**7. FARM PROPERTY LOCATION (for audit purposes)**

Hundred	Sections	Lot number	CT number	Hectares

Please make any clarifying comments here

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**8. ACKNOWLEDGEMENT AND CONSENT**

**To be signed by all business owners**

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

I/we certify that I/we have read and understood the terms and conditions of the CWA Scheme.

I/we authorise the State Government to obtain and exchange any information regarding my/our affairs from my/our banker, accountant, rural financial counsellor, or other source. I/we authorise my/our banker, accountant, rural financial counsellor or any other business contacts to supply any required information to the State Government.

I/we certify that I/we own a viable farming enterprise and have financial support to 30 April 2009.

I/we hereby agree that any water taking allocation provided under this application will be applied only for the purpose of maintaining the areas of permanent plantings designated on this form.

I/we certify that I/we do not have, or are not intending to claim, a Commonwealth Government Exit Grant.

I/we acknowledge that the Minister will consider this application under the adopted River Murray Critical Water Allocation Scheme for 2008–09.

**Each licensee must complete one of the following alternatives:**

**a) Where the applicant is a sole trader or partnership**

Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**b) Where the applicant is a company or an incorporated association**

Name of authorised person \_\_\_\_\_ Position \_\_\_\_\_  
 Name of authorised person \_\_\_\_\_ Position \_\_\_\_\_

The person(s) duly authorised to sign for and on behalf of (insert name of company or incorporated association) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Signature \_\_\_\_\_ Date \_\_\_\_\_

**9. SIGNATURE OF CASE MANAGER**

Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Date of forwarding application \_\_\_\_\_

<p><b>Return signed form and documents to:</b>  Riverland Response Centre  7 Wilson St  BERRI SA 5343</p>	<p><b>Contact:</b>  Telephone: 1800 857 327 or 08 8595 2351  Fax: 08 8595 2351  Web: <a href="http://www.pir.sa.gov.au/pirsa/drought">http://www.pir.sa.gov.au/pirsa/drought</a>  E-mail: <a href="mailto:pirsa.drought@sa.gov.sa.gov.au">pirsa.drought@sa.gov.sa.gov.au</a></p>
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<b>Office use only</b>	
Date received: __/__/20__	Application no: