

Licence—grazing expression of interest application

Use this form to lodge an expression of interest for a grazing licence under the *Crown Land Management Act 2016* when a grazing opportunity has been advertised online.

Contact us

For more information, please contact us at:

NSW Department of Industry—Lands & Water
PO Box 2155
DANGAR NSW 2309

Phone: 1300 886 235

Fax: 02 4925 3517

Web: industry.nsw.gov.au/lands

Privacy statement

The personal information you provide on this form is subject to the Privacy & Personal Information Protection Act 1989. It is being collected by NSW Department of Industry and will be used for purposes related to this application. NSW Department of Industry will not disclose your personal information to anybody else unless authorised by law. The provision of this information is voluntary or required to be supplied. If you choose not to provide the requested information we may not be able to process this application. You have the right to request access to, and correct details of, your personal information held by the department. Further information regarding privacy can be obtained from the NSW Department of Industry website at www.industry.nsw.gov.au/legal/privacy

Applicant one details

This information may be used to positively identify you during your dealings with the Department of Industry—Lands & Water (the department)

Salutation	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Dr <input type="checkbox"/> Other:		
First Name		Surname	
Email			
Residential address			
Postal address			
Work telephone			
Mobile telephone			
Fax			
APPLICANT INFORMATION			
Have you ever been declared bankrupt or sought protection from any bankruptcy laws?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you ever been convicted anywhere in Australia or overseas of an offence that resulted in at least 12 months imprisonment?		<input type="checkbox"/> Yes <input type="checkbox"/> No	

If you have responded 'Yes' to the above questions, please attach further information with your application.

Applicant two details

This information may be used to positively identify you during your dealings with the department

Salutation	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Dr <input type="checkbox"/> Other:		
First Name		Surname	
Email			
Residential address			
Postal address			
Work telephone			
Mobile telephone			
Fax			
APPLICANT INFORMATION			
Have you ever been declared bankrupt or sought protection from any bankruptcy laws?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you ever been convicted anywhere in Australia or overseas of an offence that resulted in at least 12 months imprisonment?		<input type="checkbox"/> Yes <input type="checkbox"/> No	

If you have responded 'yes' to the above questions, please attach further information with your application.

Company details

Please only complete if applicant is a company

Organisation name	
Contact	
Email	
ABN/ACN	
Organisation address	
Postal address	

Work telephone	
Mobile telephone	
Fax	

APPLICANT INFORMATION

Have any of the currently appointed directors and/or company secretaries ever been registered as banned & disqualified individuals with the Australian Securities and Investment Commission (ASIC)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have any of the currently appointed directors and/or company secretaries even been disqualified from managing corporations under Part 2d.6 of the <i>Corporations Act 2001</i> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has this entity or any affiliated entities, ever entered into voluntary administration, receivership, liquidation or insolvency?	<input type="checkbox"/> Yes <input type="checkbox"/> No

If applicant is a business, a current business search with details of the directors is to be lodged with this application.

If you have responded 'yes' to the above questions, please attach further information with your application.

Particulars of adjoining freehold land

Property address (or locality)	
Lot/section/plan no.	

Particulars of Crown land

General text description of land* (provide Lot/Section/DP number, Parish and County if known)

Include copy of any relevant map, street directory or sketch to show the location and boundary of proposed license.

Land management strategy

The details provided in this section of your application will determine the special conditions enforceable under the licence agreement. Please provide as much detailed information as possible.

1. Proposed use of Crown land. For example particulars of existing and proposed structures required to supplement use, if used in conjunction with adjoining land or as a stand-alone parcel of land and any other information relation to the use of Crown land

2. Please identify the type of stock and the stocking rate you intend to apply to the land.

3. Please identify any immediate management issues you consider to be a priority for this parcel of land.

4. Does the parcel of land have a creek/river or any other 'waterbody'?

No Yes provide details below and advise whether it is fenced off to exclude stock?

5. Outline your experience in land management and how your knowledge and expertise will ensure ongoing appropriate management of the parcel of land.

6. Please outline your drought management strategy—how do you intend to maintain acceptable groundcover during drought conditions? For example de-stocking, restricted grazing, sale, agistment, supplementary feeding

7. Please outline your bushfire hazard reduction plan—under the *Rural Fires Act 1997* landholders are required to take the necessary steps to prevent the occurrence and spread of bushfires

8. Please describe current fencing condition and your intended maintenance/replacement program. Boundary fences are to contain stock and any maintenance/replacement requires negotiation with adjoining landholder.

Declaration of offer

I			
And I			
<input type="checkbox"/> Declare that the details supplied on this form and any supporting documents attached are true and correct to the best of my knowledge <input type="checkbox"/> Have read and understand the licence agreement and conditions of offer and agree to the terms and conditions contained in therein. <input type="checkbox"/> Confirm that I am / we are able to commence operations on the site <input type="checkbox"/> Declare that I am / we are over 18 years of age, and <input type="checkbox"/> Understand a fee of \$438.00 applies should my application be successful, as per the Fee schedule on the Department's website.			
<input type="checkbox"/> Agree to a fixed rental rate <input type="checkbox"/> OR submit a rental offer	amounting to	\$	per annum plus CPI
Signature		Date	
Signature		Date	

Supporting documentation checklist

- Relevant map, street directory or sketch to show the location and boundary of proposed license

Lodgement

Completed submissions must be posted or delivered to the contact listed online for the relevant grazing opportunity. Submissions must be received no later than the time and date nominated for closing.

Office use only – Refer to the Receipting and Referrals Codes Document					
<input type="checkbox"/> BCD	<input type="checkbox"/> BCN	<input type="checkbox"/> DO	Code	Account number	
Fee Paid		Receipt Number		Date	