*Coastal Protection and Management Act 1995*

Surrender of a quarry allocation

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| **OFFICIAL USE ONLY**DATE RECEIVED

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FILE REF

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PROJECT REF

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COMPLETE FORM ENTERED BY [SIGNATURE]

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DATE

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 | *This form is to be used to apply for a surrender of a quarry allocation under Section 88 of the* Coastal Protection and Management Act 1995 *and must be completed by the quarry allocation holder. A Quarry Allocation Notice must be lodged together with this form. Answer the questions in order, unless instructed to go to another question and label any attachments alphabetically (e.g. “Attachment A”).* |
| Application details |
|  | What is the quarry allocation number to be surrendered?

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|  | Current quarry allocation holder

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| **GUIDE**The name of the Allocation Holder will be stated on the Quarry Allocation Notice. Enter the full name. |  | Responsible person

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| If the Quarry Allocation holder is not an individual, please nominate someone who is authorised to act on behalf of the organisation that holds the Quarry Allocation (e.g. Director, CEO or Manager). |  | Why is a surrender application being made?

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|  | Does a condition of your quarry allocation require you to carry out any monitoring and/or prepare reports on your activity? [ ]  Yes **→** Fill out Table 1. If you require more space, attach additional information.[ ]  No **→** Go to Question 7.Table 1 – Table of Reports

|  |  |  |
| --- | --- | --- |
| Nature of report and/or monitoring | Prepared by | Dates covered |
|       |       |       |
|       |       |       |
|       |       |       |

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|  | Have you fully complied with the conditions of your quarry allocation? [ ]  Yes[ ]  No **→** Give details in the space provided below.Provide a description of the non-compliance incident(s) and remedial action undertaken in response to this.

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|  | If you have not completed any monitoring/or reports as required as a condition of your quarry allocation, please state your reasons for not completing them. If you require more space, attach a separate signed statement.

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|  | Declaration**Note:*** If you have not told the truth in this application you may be liable for prosecution under the relevant Acts or Regulations.
* I do solemnly and sincerely declare that the information provided is true and correct to the best of my knowledge.
* I understand that all information supplied on or with this application form may be disclosed publicly in accordance with the *Right to Information Act 2009* and the *Evidence Act 1977.*

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| APPLICANT’S FULL NAME      |
| APPLICANT’S SIGNATURE | DATE      |

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| --- | --- |
| 9. | Applicant checklist[ ]  Application form(s) completed and signed[ ]  Notice of quarry allocation enclosed[ ]  Supporting information or accreditation attached (if applicable)  |

**Please return your completed return form to:**

Permit and Licence Management

Department of Environment, Science and Innovation

GPO Box 2454

Brisbane Queensland 4001

Enquiries: 1300 130 372 (Option 4)

Email: palm@des.qld.gov.au