Environmental Authority Amendment Form

Privacy Notice: Council is collecting the personal information you supply on this form for the purpose of processing your amendment. Council is authorised to do this under section 226 of the *Environmental Protection Act 1994*. Council deals with your personal information in accordance with law, including the *Information Privacy Act 2009*.



This form is to be used when applying to amend an environmental authority under sections 224 to 226 of the *Environmental Protection Act 1994* for an environmentally relevant activity (ERA). An application to amend an environmental authority is not appropriate in all circumstances.

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If there are any outstanding annual fees or annual returns associated with the environmental authority, you cannot use this form unless:

- All outstanding annual fees have been paid. Payment can be made at the same time as this amendment.
- All outstanding annual returns have been lodged. Lodgement can be included with this amendment.

If the proposed amendment involves changes that require either an existing development application to be amended or a new development application to be lodged under the *Planning Act 2016* and the application for the amendment has not been lodged, the development application must be lodged for the proposed amendment before an environmental authority amendment application can be made.

If the amendment is to correct a clerical or formal error, this request should be made in writing directly to the Council (no fees apply).

If the amendment is to transfer all or part of the environmental authority to a person, use the <u>Environmental Authority Transfer</u> <u>Form</u>.

Environmental Authority (EA) Holder Details				
EA holder name: (if partnership or company)			ABN:	
EA holder name: (if individual)				
First	Middle			Last
Preferred contact number:	Email:			
Residential Address (if individual)				
Street number and name:				
Suburb:	State:			Postcode:
Postal address (if different):				
Company Details				
Trading name:		Contac	ct name:	
Preferred contact number:	Email:			
Registered Office Address (if corporation or incorporated association)				
Street number and name:				
Suburb:	State:		Postcode:	
Postal address:				

OFFICE USE	Date:	CSO:	Information checked: Y / N
ONLY	Amount: \$	Receipt number:	EA number:

ERA Details					
Environmental authority number:					
Location of Activity					
Street number and name	e:				
Suburb:			State:	Postcode:	
Please provide a list of t	he current ERA's:				
ERA number	ERA description				
Amendment Deta	ils				
Please select relevant o	ptions that apply:				
☐ Change a condition ☐ Increase environ			Increase environmental harm		
☐ Change rehabilitation objectives		\square Increase the intensity or scale of the activity			
\square Add to the surface ar	ea of the activity	☐ Other:			
Please provide details of	f the proposed amendment requested, in	ncl	uding a justification/reason an ame	ndment is being sought:	
Land Details					
The activity will be carried out:					
\square Within the existing approved footprint for the environmental authority.					
☐ At a new fixed location (please provide details below).					
Street number and name:					
Suburb:			State:	Postcode:	
Lot number:		Plan number:			

Development Permits					
Are there any developm out the proposed amend		re any development appl	lications been made under a	a Planning Act to carry	
□ No					
☐ Yes – please comple	te below:				
Development permit number	Application name	Assessment Date of application/ Expiry date			
Environmental Im	pacts				
the following mandatory Only tick the 'N/A' check	information in the table be	low, unless the 'N/A' che ndment does not cause	endment on the environmen eck box is ticked. a change to the environmen	_	
A description of the environmental values likely to be affected by the proposed amendment.					
Details of any emissions of releases likely to be generated by the proposed amendment.					
A description of the risk and likely magnitude of impacts on the environmental values.					
Details of the management practices proposed to be implemented to prevent or minimise adverse impacts.					
Details of how the land, the subject of the application, will be rehabilitated after each relevant activity ceases.					
Waste Management					
Will waste generation or management be changed as a result of the amendment? ☐ No					
☐ Yes – please provide details on waste management:					
Environmental Pr	otection Order or S	Site Management	Plan		
Is this land currently sub	ject to an environmental p	rotection order or a site ı	management plan?		
□ No					
☐ Yes					
If selected yes above, provide details of the environmental protection order or site management plan in place.					

Environmental Management Regis	ster	
Is any part of the land currently recorded in, or	previously been recorded in, the environmental n	nanagement register?
□ No		
□ Yes		
If selected ves above, has the land been remov	/ed from the environmental management register	?
□ No	3 3	
	details have been removed from the environment	ral management register
· · · · · · · · · · · · · · · · · · ·	details have been removed from the crivilenment	ar management register.
Declaration		
Where agreed between all holders of the environment of the checkbox below.	onmental authority that one holder can sign on be	ehalf of the other joint holders,
\Box I have authority to sign this form on behalf o	of all joint holders of the environmental authority.	
I declare that:		
 I am the applicant or an authorised signator 	ory for the applicant.	
	elevant activities will continue to comply with the e indicated otherwise in my application and provi	
 480 of the Environmental Protection Act 19 containing information that I know, or ough I understand that failure to provide sufficient I understand that I am responsible for ma 	ct to the best of my knowledge. I understand that 994 to give to the administering authority or an authority and treasonably to know, is false or misleading in a not information may result in the application being anaging the environmental impacts of these activated administering authority of the effectiveness of managements.	athorised person a document material particular. refused. rities and that approval of this
Applicant name:	Applicant signature:	Date:
Signatory name: (if partnership or company)	Signatory position: (if partnership or company)	
Supporting Documentation		
Please remember to provide the following supp	orting documentation when submitting this form:	
\square An assessment of the environmental impact	s and provision of specific supporting information	l.
\square Additional details have been attached with a	description of land where ERA will be carried ou	it (if required).
\square Details of waste management (if applicable.		
☐ Details of contaminated land (if applicable).		
Fees and Charges		
For a full list of fees and charges please refer to	Council's <u>Fees and Charges Schedule</u> .	
	supplementary annual fee within 20 business da ble. An invoice will be issued for the supplementa supplementary annual fee is paid.	
Payment Information		
In person You can pay at Council's Custome Morgan; 1 Ranger Street, Gracemere.	er Service Centres: 232 Bolsover Street, Rockha	ampton; 32 Hall Street, Mount

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Rockhampton, Queensland, 4700.

By phone | Customer Service staff will contact you regarding payment via credit card or debit once this form is received. **By post** | Make your cheques/money order payable to 'Rockhampton Regional Council' and send to PO Box 1860,