

Mount Isa City Council

23 West Street, Mount Isa
PO Box 815,
Mount Isa QLD 4825

Telephone 07 4747 3200 Facsimile 07 4747 3209
Email city@mountisa.qld.gov.au
Website www.mountisa.qld.gov.au



Local Government
Act 1993

Local Law
(Extractive
Industries)

Extractive Industries

Application for Extractive Industries Permit

Contact Council if you have any specific enquiries regarding fees or how to complete this form. Type or print clearly and select boxes where applicable. Enter "n/a" if the question does not apply.

Application is for

Extractive Industries Permit Fee _____

Applicant details

Title Mr Mrs Ms Miss Other (specify)

Family name

Given names

Position

I hereby certify that the facts and circumstances set out herein are true and complete and form the basis of my application and further, I certify that I will indemnify the Council against the costs of any legal action that may be instituted by any objectors to this application.

Signature _____ Date / /

Title Mr Mrs Ms Miss Other (specify)

Family name

Given names

Position

I hereby certify that the facts and circumstances set out herein are true and complete and form the basis of my application and further, I certify that I will indemnify the Council against the costs of any legal action that may be instituted by any objectors to this application.

Signature _____ Date / /

Contact details

Select as applicable.

Business Private

Contact person

Postal address

Locality / Suburb

State

Postcode

Contact ph.

Mobile

Contact fax

Email _____

Business details

Business name must be registered with the Office of Fair Trading. If applicant is a company, insert company name and ACN / ARBN.

Business name _____ BN

Company name _____ ACN / ARBN

Street address

Locality / Suburb

State

Postcode

Enter postal address if different from street address.	Postal address		
	Locality / Suburb	State <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Postcode <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	Contact ph. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Mobile <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
	Contact fax <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Email	
Real property description – refer to Rates Notice.	Lot no.	Reg. plan no.	Parish

Proposed operation details

	Nature of operation		
	Site address		
	Locality / Suburb	State <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Postcode <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Real property description – refer to Rates Notice.	Lot no.	Reg. plan no.	Parish
---	---------	---------------	--------

If only part of the land is to be used, show

The total area _____ ha. The area to be used _____ ha.

Attach a metes and bounds description of site

Current Town Planning consent is effective? No Yes

The expected average rate of removal shall be _____ m³ / month

The expected maximum rate of removal shall be _____ m³ / month

Access to site via (name road)		
Duration of operation and stages		

Requested hours of operation	Weekdays	am	pm
	Saturday	am	pm
Requested hours of carting	Weekdays	am	pm
	Saturday	am	pm
Details on stockpiles	Height	Diameter	

Details of operation vehicles		

Proposed haulage routes		

Type of material to be removed		

Quantity of material to be removed		
------------------------------------	--	--

Maximum number of trucks leaving the site daily will be	<input type="text"/>
Will the processing be carried out on the land?	<input type="checkbox"/> No <input type="checkbox"/> Yes

If yes, describe

Will water be allowed to accumulate in excavation?	<input type="checkbox"/> No <input type="checkbox"/> Yes
--	--

If yes, to what depth

Will blasting operations be carried out?	<input type="checkbox"/> No <input type="checkbox"/> Yes
Will any products or waste be entering a swamp, watercourse, water storage drain, sewer, drainage easement, sewerage easement, or likely to cause injury or interfere with any land not being used?	<input type="checkbox"/> No <input type="checkbox"/> Yes

	How is the dust to be suppressed?
	How is erosion to be prevented or controlled?

Owner/s / Proprietor/s consent

Select as applicable.	Consent of <input type="checkbox"/> Land Owner/s <input type="checkbox"/> Registered Proprietor/s	
This is the name and address of the owner/s / proprietor/s of the premises.	Name	
	Street address	
	Locality / Suburb	
	State	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	Postcode	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	Contact ph.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Mobile <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	Contact fax	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Email _____
I, the registered owner / proprietor of the described land, consent to the lodgement and processing of this application.		
Signature	Date	<input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Lodgement

Please attach the following:

1. Two (2) copies of a plan and specifications showing:
 - sufficient detail to enable the Council to understand the nature of the proposed extractive industry operation.
 - the location, together with the property address and the real property description of the land.
 - the limits of the area on which it is proposed to conduct the extractive industry.
 - the depth and extent of the proposed excavation; and / or the height of and numbers of proposed stockpiles.
 - the estimated depth and description of the overburden present, if applicable.
 - the location of any existing or proposed buildings, so far as is known.
 - the intended duration and staging of the proposed extractive industry.
 - the distance of the proposed excavation and / or stockpiles from adjoining drains, watercourses, roads and future transport corridors (e.g. road, rail and public transport as shown on the relevant Planning Scheme and associated documents) footpaths and buildings (where applicable).
 - groundwater resources, flows, existing users, etc.
 - surface water resources, flows, quantities, licensing requirements, existing users etc.
 - riparian vegetation.
 - provision and maintenance of buffers for the integrity of watercourses.
2. A statement signed by the applicant, the owner and the occupier of the land indicating the size, the proposed haulage routes and the description of the vehicle or vehicles to be used, type of product to be carried therein, the maximum weight of any load, the type of covering on the vehicle or other means to be used to prevent dust escaping from the vehicle in such a way as in the opinion of the Council, may cause or be likely to cause, a nuisance.
3. An application for Blasting Operations, if blasting is to be carried out as part of the extractive industry operation.
4. A copy of any environmental impact statement or similar document prepared as part of the process of obtaining development approval for the proposed extractive industry operations.
5. A copy of the additional owner/s / proprietor/s consent (if applicable). This consent must state the applicant/s name, the premises to which the application refers, provide details regarding the owner/s / proprietor/s consent to the application and be signed by the owner/s / proprietor/s.

Please note: This application and fee MUST be lodged with your Council.

Office use only

Application fee		Reg. no.	
Receipt code		ID no.	
Authorised officer		Inspection date	
Recommendation			Rec. no.
Date	<input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Account property no.	