

Application form

OFFICIAL USE ONLY

DATE RECEIVED

--	--	--

FILE REF

--

PROJECT REF

--

COMPLETE FORM

CORRECT AA

COMPLETE FEE

ENTERED BY [SIGNATURE]

DATE

--	--	--

GUIDE

The form for transferring an apiary permit must be completed by the transferee (the proposed new holder) and the current holder of the apiary permit.

Transfer of an apiary permit

Important information for applicants

This form is to be used for the transfer of an apiary permit from the current holder to another legal entity under section 7a of the *Nature Conservation Regulation 1994*.

Transferee information

1. Apiary permit number to be transferred

APIARY PERMIT NUMBER

--

2. Applicant details

FAMILY NAME (OR CORPORATION NAME)		TITLE	
GIVEN NAME/S		DATE OF BIRTH	
RESIDENTIAL ADDRESS (OR REGISTERED BUSINESS ADDRESS FOR CORPORATIONS)			POST CODE
TELEPHONE (BUSINESS HOURS)	MOBILE	FACSIMILE	
TELEPHONE (AFTER HOURS)	E-MAIL		
POSTAL ADDRESS (WRITE "AS ABOVE" IF THE SAME AS RESIDENTIAL/REGISTERED BUSINESS ADDRESS)			POST CODE

3. 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 apply for the transfer of this apiary permit.
- I do solemnly and sincerely declare that the information provided is true and correct to the best of my knowledge and I make this solemn declaration conscientiously believing the same to be true and by virtue of the provisions of the *Oaths Act 1867*.
- I understand that all information supplied on or with this application form may be disclosed publicly in accordance with the *Freedom of Information Act 1992* and the *Evidence Act 1977*.

APPLICANT'S NAME

APPLICANT'S SIGNATURE

DATE

Applicant checklist

- Application form(s) completed and signed by transferee
- Application form(s) completed and signed by current holder
- Fees paid or enclosed (if applicable)
- Supporting information or accreditation attached (if applicable)

Current holder information

4. Current apiary permit holder name:

CURRENT APIARY PERMIT HOLDER'S NAME

5. Current apiary permit number:

APIARY PERMIT NUMBER

6. 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 agree to the transfer of this apiary permit.
- I do solemnly and sincerely declare that the information provided is true and correct to the best of my knowledge and I make this solemn declaration conscientiously believing the same to be true and by virtue of the provisions of the *Oaths Act 1867*.
- I understand that all information supplied on or with this application form may be disclosed publicly in accordance with the *Freedom of Information Act 1992* and the *Evidence Act 1977*.

CURRENT APIARY PERMIT HOLDER'S SIGNATURE

CURRENT APIARY PERMIT HOLDER'S SIGNATURE

DATE

Please return your completed application kit to:

**Ecoaccess Customer Service Unit
Environmental Protection Agency**

PO Box 15155
City East
Queensland 4002

Enquiries: **1300 368 326**
Facsimile: (07) 3115 9600
Email: eco.access@epa.qld.gov.au