



## APPLICATION TO CONSOLIDATE EXPLORATION LICENCES

**Q1. Licences to be consolidated**

\_\_\_\_\_

\_\_\_\_\_

**Q2. Full name(s) or company name(s) of applicant(s) and percentage interest**

Surname or company name	ACN / ARBN	Incorporated in	Given name/s	%
<i>(If insufficient space please attach list)</i>				100

**Note: Ownership of ALL titles to be consolidated must be the same**

**Q3. Postal address for service of notices**

\_\_\_\_\_

\_\_\_\_\_

Postcode: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Mobile No.: \_\_\_\_\_

Email Address: \_\_\_\_\_ Fax No.: \_\_\_\_\_

**Q3. Name and address of principal contact:**

\_\_\_\_\_

\_\_\_\_\_

Postcode: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Mobile No.: \_\_\_\_\_

Email Address: \_\_\_\_\_ Fax No.: \_\_\_\_\_

**Q4. Proposed exploration program and estimated expenditure (for the remaining term)**

Applicants are to outline their proposed exploration program for the remaining term.

<i>Details</i>	\$
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

NOTE: If the space provided is insufficient, numbered sheets of the same size as this page (i.e. A4) should be attached.

**Q5. Signature on this application**

Applications may be lodged electronically, personally or delivered to the office of the Registrar of Mines by the applicant(s).

<i>Full Name of Applicant/s</i>	<i>Signatures of Applicant/s</i>	<i>Date</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Note:**

1. If application is being lodged electronically no signatures are required as application is verified using the credit card transaction.
2. If the signature on this form is not that of the applicant (or where the applicant is a company, the Company Secretary or a Director of that company), written evidence must be provided that the person signing this declaration is authorised to do so on behalf of the applicant, for example a signed statement on company letterhead.

**The prescribed application fee (see page 3) must accompany this application.**

Applications made through Service Tasmania: **STaRS Code: MR1**

Amount paid \_\_\_\_\_ Receipt Number \_\_\_\_\_

Cashier (Initial & date) \_\_\_\_\_

Cost allocation: 2125.45.4612

**OFFICE USE ONLY**

Consolidation:                    ***Approved***                    ***Refused***

Signed Director of Mines \_\_\_\_\_ Date \_\_\_\_\_

Conditions of approval:

1. That the licensee undertakes the works program as provided with this application
2. \_\_\_\_\_
3. \_\_\_\_\_

Date applicant notified of approval/refusal \_\_\_\_\_

Personal information we collect from you for registration and tenement administration processes will be used by the Director of Mines for that purpose and may be used for other purposes permitted by the *Mineral Resources Development Act 1995* and associated laws. Your personal information may be disclosed to contractors and agents of the Director of Mines, law enforcement agencies and other public sector bodies or organisations authorised to collect it.

This information will be managed in accordance with the *Personal Information Protection Act 2004* and may be accessed by you on request to the Department. You may be charged a fee for this service. Failure to provide this information may result in your application not being processed or records not being properly maintained.

## CHECKLIST

The following must accompany the application:

Please tick

- |  |   |
|--|---|
| <p>¶ The licences to be consolidated</p> <p>¶ Proof of identity of applicant<br/>         Minimum age of 18 years if applicant is not a company.<br/>         e.g. — <i>Individual</i> – Photocopy of Driver’s Licence, Passport<br/>                   <i>Company</i> – Photocopy of Certificate of Incorporation or Australian Companies Number (ACN) and list of directors/office holders</p> <p>¶ Evidence that the person signing this application is authorised to do so</p> <p>¶ Prescribed Fee (Consolidation of exploration licence):                      \$324.65</p> | <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> |
|--|---|

### ADDRESS FOR CORRESPONDENCE AND LODGEMENT OF FORMS

Registrar of Mines  
 Mineral Resources Tasmania

*Postal Address:*  
 PO Box 56  
 ROSNY PARK TAS 7018

*Street Address:*  
 30 Gordons Hill Road  
 ROSNY PARK TAS 7018

Forms and attachments may be lodged electronically at [info@mrt.tas.gov.au](mailto:info@mrt.tas.gov.au)

### FURTHER ADVICE

Further advice may be obtained by contacting Mineral Resources Tasmania:

Telephone:           (03) 6165 4800  
 Facsimile:           (03) 6173 0222  
 Email:                [info@mrt.tas.gov.au](mailto:info@mrt.tas.gov.au)  
 Internet:             [www.mrt.tas.gov.au](http://www.mrt.tas.gov.au)