T 1300 79 49 29
F (07) 4197 4455
P PO Box 1943
HERVEY BAY QLD 4655
E enquiry@frasercoast.qld.gov.au
W www.frasercoast.qld.gov.au

Application for an Environmental Authority (New, Amendment or Transfer) *Environmental Protection Act 1994*

IMPORTANT INFORMATION

Privacy Notice: In using this form you are providing personal information such as name and contact details**.** This information will be used only for the purpose for which the completion of this form is intended, and will only be accessed by persons who have been authorised to do so. Your personal information is handled in accordance with the *Information Privacy Act 2009*.

TAKE NOTE: An Environmental Authority **is not able to be applied for** if a development approval is required for the activity and a development approval has not first been obtained under the *Planning Act 2016*.

FEES & CHARGES INFORMATION

The following fees apply to an Application for a new Environmental Authority:

Application Fee - this fee applies to the lodgement and assessment of the Application and one inspection* prior to commencing (Final Inspection); and
Annual Authority and Inspection Fee - this fee applies to the issuing of an Authority for the stated term and all routine inspections* to be undertaken during the period for which the Authority is valid.

The following fee applies to an Application to transfer an existing Environmental Authority:
Application for Transfer – this fee applies to the lodgement and assessment of the Application and the issuing of an Authority into the name of the new holder for the remaining term.

The following fee applies to the Amendment of an existing Environmental Authority:
Administrative Amendment – this fee applies to the lodgement and assessment of the Application for an administrative amendment to an Environmental Authority and the issuing of an amended Authority to reflect the changes.
Amendment of Environmental Authority – this fee applies to the assessment of the Application for an Amendment and one inspection.

Please refer to the Fees and Charges Schedule in place at the time of making this Application for fee amounts. The Fees and Charges Schedule for the current financial year can be accessed on Council's website.

DEFINITIONS

ADMINISTRATIVE AMENDMENT: is for administrative amendments to an Authority only and may include a change of business trading name etc. A new certificate will be issued upon approval of an administrative amendment.

MINOR AMENDMENT: is for a change to conditions of an Environmental Authority, including conversion of conditions; a minor increase in environmental harm, scale or intensity caused by the Environmentally Relevant Activity; or an increase in the surface area for the relevant activity of no more than 10% of the existing area (refer to Chapter 5, Part 7, Division 1 of the *Environmental Protection Act 1994*).

MAJOR AMENDMENT: is a significant increase in scale or intensity of the Environmentally Relevant Activity; an increase in the surface area for the relevant activity of more than 10% of the existing area, or an increase in degree of environmental harm caused by the Environmentally Relevant Activity (refer to Chapter 5, Part 7, Division 1 of the *Environmental Protection Act 1994*).

Section 1: APPLICATION TYPE	
Application for New Environmental Authority *Note: A mobile activity undertaken in multiple local government areas must be licenced by DETSI*. A temporary activity is carried out at any one location for less than 28 days in a calendar year. (Complete sections 1-4, 8 and 9)	☐ Site Specific ☐ Temporary Activity ☐ Mobile Activity
Amend Existing Environmental Authority (Complete sections 1- 3, 5, 8, 9, and any other sections relevant to the amendment being applied for)	☐ Yes ***Existing Environmental Authority Number:*** **EP**_____
Transfer of Existing Environmental Authority (Complete sections 1-3, 7, 8-10, and any other sections relevant to the transfer)	☐ Yes ***Existing Environmental Authority Number:*** **EP**_____
Proposed First Day of Trade: Council will endeavour to accommodate your proposed first day of trade, however this will be dependent on the completeness of the application when lodged and competing priorities within the Environmental Health Section.	

Section 2: APPLICANT DETAILS	
• The applicant is to be the OWNER of the business. • Complete ***EITHER*** *the Individual Applicant/s Section or the Registered Entity Section* ***only***. • *If a Company, insert Company Name and ACN.*	
An environmental authority ***cannot be issued*** *unless you are registered as a suitable operator with Department of Environment, Tourism, Science and Innovation (DETSI).*	
Registration Number for suitable operator: *If not, provide details of application to DETSI for suitable person qualification.*	
COMPLETE FOR INDIVIDUAL APPLICANT/S ONLY	
APPLICANT ONE	
Title:	☐ Mr ☐ Mrs ☐ Ms ☐ Other: _____
Surname:	
Given Name/s:	
APPLICANT TWO	
Title:	☐ Mr ☐ Mrs ☐ Ms ☐ Other: _____
Surname:	
Given Name/s:	

OR

COMPLETE FOR REGISTERED ENTITY/COMPANY ONLY	
Company Name:	
Director/s Name/s:	
ACN:	

Section 3: CONTACT & BUSINESS DETAILS	
Business name relates to the Trading Name of the business and will appear on the certificate.	
Business Trading Name:	
Business Trading Address:	
Postal Address: *if different to above*	
Business Phone:	
Business Email:	
Accounts Email: *if different to above*	
On-site Contact Person:	
Mobile:	
After Hours Phone:	
Email:	

Section 4: ERA DETAILS		
Please list all ERAs that relate to this application. For more than two ERAs, please attach a separate page.		
ERA Number	**ERA Name**	**Threshold**
Provide details of the land where the ERA will be carried out:	Street Number: _____ Street Name: _____ Suburb: _____ Postcode: _____ Lot: _____ Plan: _____	
Provide details of any development permits in effect or any development applications, which have been made under the *Planning Act 2016* (Qld) in relation to the activity:		

Section 5: AMENDMENT DETAILS (IF APPLICABLE)	
Complete this section only if making amendments to your existing Environmental Authority. ***NOTE:** Only an environmental authority holder can apply to amend their environmental authority.*	
Is the amendment to correct an administrative error?	☐ Yes ☐ No If yes, please email Council to have this rectified in place of this application form at: enquiries@frasercoast.qld.gov.au
Is the amendment for a change in conditions/conversion of conditions?	☐ Yes ☐ No
Is the amendment to remove an ERA/s from the environmental authority?	☐ Yes ☐ No
Is the amendment to amalgamate two (2) or more environmental authorities?	☐ Yes ☐ No If Yes, **do not use this form**. Please use the form '*Application for Amalgamation of Environmentally Relevant Activities*'
Does the amendment require a material change of use under *Planning Act 2016* (Qld)*?*	☐ Yes ☐ No If yes, you **cannot** submit this application for amendment of an environmental authority unless you have also lodged an application with Council for a development approval.
Trading Name:	
Environmental Authority Holder(s):	
ABN/ACN:	
Registered Business Address:	
Contact Person Name:	
Phone Number:	
Email Address:	
Provide details of the proposed amendment/s:	

Where will the amended activities be carried out:	☐ The activity will be carried out within the existing approved footprint of the environmental authority. ☐ The activity will be carried out at a new fixed location: Street Number: _____ Street Name: _____ Suburb: _____ Postcode: _____ Lot: _____ Plan: _____
Provide details of any development approvals in effect. If not already in effect, have any development applications been made under the *Planning Act 2016* (Qld) to carry out the proposed amendment?	

Section 6: REMOVAL OF ERA FROM ENVIRONMENTAL AUTHORITY	
Complete this section to remove ERAs from an Environmental Authority. ***NOTE:** Only an environmental authority holder can apply to remove ERAs from their Environmental Authority.* *For the removal of more than three (3) ERAs, please attach a separate page.*	
DETAILS OF FIRST ERA TO BE REMOVED	
ERA Number:	
ERA Name:	
Threshold:	
Commenced:	☐ Yes ☐ No
Location:	
DETAILS OF SECOND ERA TO BE REMOVED	
ERA Number:	
ERA Name:	
Threshold:	
Commenced:	☐ Yes ☐ No
Location:	
DETAILS OF THIRD ERA TO BE REMOVED	
ERA Number:	
ERA Name:	
Threshold:	
Commenced:	☐ Yes ☐ No
Location:	

Section 7: TRANSFER DETAILS	
Complete this section only if transferring an Environmental Authority. ***NOTE:*** *Only an environmental authority holder can apply to transfer their environmental authority.*	
Type of transfer required:	☐ The environmental authority is to be transferred in full to a new holder. Once the transfer is complete, the existing holders will no longer be holders of the environmental authority. **Proceed below** ☐ A new joint holder is to be added to the environmental authority. The existing holder will become a joint holder for all ERAs contained within the environmental authority. **Proceed below** ☐ Only a part of the environmental authority is to be transferred. For example, if multiple prescribed ERAs are on an environmental authority and one of the ERAs is to be transferred to a new holder. **Proceed below** ☐ The environmental authority has joint holders and this application is only to remove one or more of the current joint holders. No new holders are proposed to be added. **Proceed below**

Section 7.1 Provide details of New Holder(s) (the Transferee/s or Additional Joint Holders)	
COMPLETE FOR INDIVIDUAL HOLDER/S ONLY	
NEW HOLDER ONE	
Title:	☐ Mr ☐ Mrs ☐ Ms ☐ Other: _____
Surname:	
Given Name/s:	
NEW HOLDER TWO	
Title:	☐ Mr ☐ Mrs ☐ Ms ☐ Other: _____
Surname:	
Given Name/s:	
COMPLETE FOR REGISTERED ENTITY/COMPANY HOLDER/S ONLY	
Company Name:	
Director/s Name/s:	
ACN:	
Registered Business Address:	
Postal Address: *if different to above*	
CONTACT AND BUSINESS DETAILS	
Business Phone:	
Business Email:	
Accounts Email: *if different to above*	
Contact Person:	
Mobile:	
After Hours Phone:	
Email:	
Registration Number for suitable operator/s: *(If not currently a registered suitable operator, provide details of application lodged with DETSI)*	

If the application is for a partial transfer of the environmental authority, provide details:	
If the proposed transferee will operate the environmental authority as part of an existing environmental authority, provide details:	Existing Environmental Authority number held by the transferee: EP _____ Please attach supporting information to this application that demonstrates the activities approved under the existing environmental authority and transferred environmental authority can be operated as a single operation. The below supporting information will need to be submitted with your application to satisfy the above requirements: ☐ Evidence that the activities will be carried out under the day-to-day management of a single responsible individual (e.g. a site manager or operations manager). ☐ Evidence that the activities are operationally interrelated. ☐ If the activities are, or will be carried out at more than one (1) place, evidence that the places are separated by distances short enough to make the day-to-day management of the activities feasible.

Section 7.2 Provide details of Current Holders to be Removed	
Provide details of all holders to be removed from this environmental authority	
Individual or business name: (include trading name if relevant)	Name: ABN/ACN:
Individual or business name: (include trading name if relevant)	Name: ABN/ACN:

Section 8: ATTACHMENTS	
☐	A description of the environmental values likely to be affected by the ERA.
☐	A description of the risk and likely magnitude of impacts on the environmental values by the ERA.
☐	Details of any emissions or releases likely to be generated by the ERA.
☐	Details of the management practices proposed to be implemented to prevent or minimise adverse impacts.
☐	Details of how the land subject of the application will be rehabilitated after each relevant activity ceases.
☐	Details of the proposed measures for minimising and managing waste generated by the ERA.
☐	Details of any amended site management plan or environmental protection order that relates to the land subject of the application, where applicable.
☐	Evidence that the activities will be carried out under the day-to-day management of a single responsible individual (e.g. a site manager or operations manager) **(applicable only if transferring an environmental authority)**
☐	Evidence that the activities are operationally interrelated **(applicable only if transferring an environmental authority)**
☐	If the activities are, or will be, carried out at more than one (1) place, provide evidence that the places are separated by distances short enough to make the day-to-day management of the activities feasible **(applicable only if transferring an environmental authority)**

Section 9: DECLARATION OF EXISTING APPROVAL HOLDER/S	
For more than two (2) approval holders, please attach a separate page.	
APPROVAL HOLDER ONE	
I _____ declare that the information provided by me in this application is true and correct and I consent to the making of enquiries and exchange of information with authorities of any Local, State/Territory or Commonwealth department in regard to any matters relevant to this application.	
Signature of Applicant:	
Date:	
Position in Company (if relevant):	
APPROVAL HOLDER TWO	
I _____ declare that the information provided by me in this application is true and correct and I consent to the making of enquiries and exchange of information with authorities of any Local, State/Territory or Commonwealth department in regard to any matters relevant to this application.	
Signature of Applicant:	
Date:	
Position in Company (if relevant):	

Section 10: DECLARATION OF NEW APPROVAL HOLDER/S (TRANSFEREE/S OR ADDITIONAL)	
For more than two (2) approval holders, please attach a separate page.	
NEW APPROVAL HOLDER ONE	
I _____ declare that the information provided by me in this application is true and correct and I consent to the making of enquiries and exchange of information with authorities of any Local, State/Territory or Commonwealth department in regard to any matters relevant to this application.	
Signature of Applicant:	
Date:	
Position in Company (if relevant):	
NEW APPROVAL HOLDER TWO	
I _____ declare that the information provided by me in this application is true and correct and I consent to the making of enquiries and exchange of information with authorities of any Local, State/Territory or Commonwealth department in regard to any matters relevant to this application.	
Signature of Applicant:	
Date:	
Position in Company (if relevant):	