



Department of Water and Environmental Regulation (DWER)  
Department of Mines, Industry Regulation and Safety (DMIRS)

## Application for an amendment to a clearing permit

*Environmental Protection Act 1986, section 51M*

### FORM C4

Clearing of native vegetation is prohibited in Western Australia except where a clearing permit has been granted or an exemption applies. A person who causes or allows unauthorised clearing commits an offence.

CPS No.
Date stamp

Part 1: Assessment bilateral agreement	
<p>If the amendment of a clearing permit will or is likely to impact on a matter of national environmental significance identified under the <i>Environment Protection and Biodiversity Conservation Act 1999</i> (Cth) (EPBC Act) the original application must have been assessed in accordance with the bilateral assessment, and a variation under the EPBC Act is required prior to submitting this amendment application form.</p> <p>Further information is located in <i>Form Annex C7</i> and <i>A guide to native vegetation clearing processes under the Assessment bilateral agreement</i> available at <a href="http://www.der.wa.gov.au/our-work/clearing-permits">www.der.wa.gov.au/our-work/clearing-permits</a>.</p>	Do you want your proposed clearing action assessed in accordance with, or under, an EPBC Act Accredited Process such as the assessment bilateral agreement?
	<input type="checkbox"/> Yes EPBC number:
	<input checked="" type="checkbox"/> No Proceed to Part 2
	List the controlling provisions identified in the notification of the controlled action decision.
	<input type="checkbox"/> <i>Form Annex C7</i> is complete and the required supporting information is attached.

Part 2: Clearing permit details			
Amendments can only be made to active clearing permits. Applications must be made more than 90 working days prior to the existing permit expiring to ensure there is adequate time to assess the amendment.	Permit number for existing clearing permit	CPS 6078/2	
	Permit holder's name (as it appears on the existing clearing permit)	Commissioner of Main Roads Western Australia	
FILE REFERENCE	Permit expiry date:	31 December 2036	
	Mark this box if there are less than 90 working days until the expiry of the existing permit.	<input type="checkbox"/>	

Part 3: Applicant																	
<b>Applicant details</b>																	
<p>To apply for an amendment to a permit you must be the current holder of the existing permit.</p> <p>Include Australian Company Number (ACN) if the proposed permit holder is a body corporate or other entity formed at law.</p>	<p>Are you applying as an individual, a company or incorporated body? Enter details for one only.</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; border-bottom: 1px solid black;">An individual</td> <td style="width: 15%; border-bottom: 1px solid black;">Title</td> <td style="width: 15%; border-bottom: 1px solid black;">Mr <input type="checkbox"/></td> <td style="width: 15%; border-bottom: 1px solid black;">Mrs <input type="checkbox"/></td> <td style="width: 15%; border-bottom: 1px solid black;">Ms <input type="checkbox"/></td> <td style="width: 15%; border-bottom: 1px solid black;">Other:</td> </tr> <tr> <td colspan="6" style="border-bottom: 1px solid black;">Name/s</td> </tr> </table> <p><b>OR</b></p> <p>A body corporate or other entity formed at law (include ACN)</p> <p style="margin-left: 20px;">Main Roads Western Australia ABN: 50 860 676 021</p>	An individual	Title	Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Ms <input type="checkbox"/>	Other:	Name/s									
An individual	Title	Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Ms <input type="checkbox"/>	Other:												
Name/s																	
<b>Applicant contact details</b>																	
<p>If applying as a company or incorporated body, please also supply the registered business office address.</p> <p>DWER and DMIRS prefer to send all correspondence electronically via email.</p> <p>We request that you consent to receiving all correspondence relating to instruments and notices under Part V of the EP Act ("Part V documents") electronically via email by indicating your consent in this section of the application form.</p> <p>Where 'yes' is selected, all correspondence from DWER or DMIRS (as applicable) will be sent to you via email, to the email address provided in this section.</p> <p>Where 'no' has been selected, Part V documents will be posted to you in hard copy to the postal/business address you have provided in this section. Other general correspondence may still be sent to you via email.</p>	<p>Provide contact details for the above individual or body corporate.</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%; border-bottom: 1px solid black;">Contact person (and position, if applicable)</td> <td style="width: 20%;"></td> </tr> <tr> <td style="border-bottom: 1px solid black;">Company name (if applicable)</td> <td></td> </tr> <tr> <td style="border-bottom: 1px solid black;">Postal / business address</td> <td></td> </tr> <tr> <td style="border-bottom: 1px solid black;">Phone (fixed line):</td> <td></td> </tr> <tr> <td style="border-bottom: 1px solid black;">Email address</td> <td></td> </tr> </table> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 75%; border-bottom: 1px solid black;"><i>I consent to all written correspondence between myself (the applicant) and DWER/DMIRS (as applicable), regarding the premises which is the subject of this application, being exclusively via email, using the email address I have provided above.</i></td> <td style="width: 10%; text-align: center; border-bottom: 1px solid black;"><b>Yes</b></td> <td style="width: 15%; text-align: center; border-bottom: 1px solid black;"><b>No</b></td> </tr> <tr> <td style="border-bottom: 1px solid black;"></td> <td style="text-align: center; border-bottom: 1px solid black;"><input checked="" type="checkbox"/></td> <td style="text-align: center; border-bottom: 1px solid black;"><input type="checkbox"/></td> </tr> </table>	Contact person (and position, if applicable)		Company name (if applicable)		Postal / business address		Phone (fixed line):		Email address		<i>I consent to all written correspondence between myself (the applicant) and DWER/DMIRS (as applicable), regarding the premises which is the subject of this application, being exclusively via email, using the email address I have provided above.</i>	<b>Yes</b>	<b>No</b>		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Contact person (and position, if applicable)																	
Company name (if applicable)																	
Postal / business address																	
Phone (fixed line):																	
Email address																	
<i>I consent to all written correspondence between myself (the applicant) and DWER/DMIRS (as applicable), regarding the premises which is the subject of this application, being exclusively via email, using the email address I have provided above.</i>	<b>Yes</b>	<b>No</b>															
	<input checked="" type="checkbox"/>	<input type="checkbox"/>															
<b>Contact details for enquiries</b>																	
<p>If different from the applicant's contact details, enter the contact details of a person with whom DWER or DMIRS should liaise with concerning this clearing application.</p>	<p>Where contact details differ to those of the applicant, complete the below section:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%; border-bottom: 1px solid black;">Contact person (and position, if applicable)</td> <td style="width: 20%;"></td> </tr> <tr> <td style="border-bottom: 1px solid black;">Company name (if applicable)</td> <td></td> </tr> <tr> <td style="border-bottom: 1px solid black;">Postal / business address</td> <td></td> </tr> <tr> <td style="border-bottom: 1px solid black;">Phone (fixed line)</td> <td style="border-bottom: 1px solid black;">Phone (mobile)</td> </tr> <tr> <td colspan="2" style="border-bottom: 1px solid black;">Email address</td> </tr> </table>	Contact person (and position, if applicable)		Company name (if applicable)		Postal / business address		Phone (fixed line)	Phone (mobile)	Email address							
Contact person (and position, if applicable)																	
Company name (if applicable)																	
Postal / business address																	
Phone (fixed line)	Phone (mobile)																
Email address																	

Part 4: Proposed amendments		
<p>Additional information to support the assessment of your application to amend may be attached.</p> <p>Please ensure you have included the following as part of your application:</p> <ul style="list-style-type: none"> <li>• a photocopy of the granted clearing permit, with proposed changes highlighted, and</li> <li>• payment of the prescribed fee.</li> </ul>	<p>Indicate the proposed change/s to your clearing permit by selecting the relevant box/es:</p> <p><input type="checkbox"/> Extend the duration of the clearing permit.</p> <p><input checked="" type="checkbox"/> Vary / add / remove a permit condition relating to a matter other than the size or boundary of the area to be cleared.</p> <p><input type="checkbox"/> Amend the size of the area permitted to be cleared, or add / remove a land parcel on the clearing permit.</p> <p><input type="checkbox"/> Redescribe the boundary of the area authorised to be cleared <i>[for an area permit only]</i></p> <p><input type="checkbox"/> Make a correction to the clearing permit.</p> <p><input type="checkbox"/> Other.</p>	
	<p>Provide details of the proposed change(s), and the rationale for it / them.</p> <p>Request to amend Condition 10(b) from:  <i>"Prior to 30 December 2018, the Permit Holder shall submit a Threat Management Program to the CEO for the CEO's approval"</i></p> <p>To  <i>"Prior to 1 July 2019, the Permit Holder shall submit a Threat Management Program to the CEO for the CEO's approval"</i></p> <p>Main Roads has entered into a Memorandum of Understanding with the Department of Biodiversity, Conservation and Attractions (DBCA) who are responsible for preparing a Threats Management Plan (TMP) following completion of on-ground population surveys and threats assessments. DBCA have informed Main Roads that there have been substantial delays in completing on-ground surveys due to the record 2017/2018 wet season, the subsequent access restrictions and negotiations with land owners.</p> <p>Stephen Van Leeuwen from the DBCA has recently informed Main Roads that additional time is required to prepare the plan. The due date proposed takes into account additional time to complete surveys and prepare a draft TMP.</p>	
	<p>For an application to amend the size of the area permitted to be cleared, or add a land parcel to the clearing permit, you must have the authority of the landowner to access the land and undertake the clearing.</p> <p>Evidence of authority can include, for example, a copy of the certificate of title or a letter of authority from the land owner.</p> <p>Note: the letter of authority must explicitly state the applicant has authority to clear on the land.</p>	<p>State the nature of the applicant's authority to access the land to be cleared.  <i>[Attach evidence of authority]</i></p>
	<p>Provide additional property details if required – if applying to extend the size of the area to be cleared into another land parcel.</p>	<p>Land description: volume and folio number, lot or location number(s), Crown lease or reserve number, pastoral lease number, or mining tenement number of all properties.</p>
	<p>You must provide evidence that avoidance and mitigation options have been pursued to eliminate, reduce or otherwise</p>	<p>Have alternatives that would avoid or minimise the need for clearing been considered and applied? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, provide details:</p>