



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

## Application to surrender a clearing permit

*Environmental Protection Act 1986, section 51MA*

# FORM C6

The clearing of native vegetation is prohibited in Western Australia unless a clearing permit has been granted for the clearing or where a permit is not required (either due to a referral determination that one is not needed or because an exemption applies). A person who causes or allows unauthorised clearing commits an offence.

For further information on the stages of assessment for clearing permit applications (including surrendering an existing permit), see the [Procedure: Native vegetation clearing permits](#) on DWER's website.

Date stamp

### Part 1: Clearing permit details

Please ensure that the original clearing permit, associated conditions and plan are returned with this application. Please explain why the clearing permit is to be surrendered.	Permit number for existing clearing permit	<b>CPS 8574/1</b>
FILE REFERENCE	Reasons for surrender	<b>Clearing activities completed.</b>

### Part 2: Applicant details

Applicant details																													
<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 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") 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>Is the permit holder an individual, or a company or incorporated body? Enter details for one only.</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">An individual</td> <td style="width: 10%;">Title</td> <td style="width: 10%;">Mr <input type="checkbox"/></td> <td style="width: 10%;">Mrs <input type="checkbox"/></td> <td style="width: 10%;">Ms <input type="checkbox"/></td> <td style="width: 10%;">Other:</td> <td style="width: 40%;"></td> </tr> <tr> <td></td> <td>Name(s)</td> <td colspan="5"></td> </tr> </table> <p><b>OR</b></p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">A body corporate or other entity formed at law (include ACN)</td> <td style="width: 50%;"><b>FMR Investments Pty Ltd</b></td> </tr> <tr> <td></td> <td><b>ACN 009 411 349</b></td> </tr> </table> <p>Provide contact details for the above individual or body corporate.</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">Contact person &amp; position (if applicable)</td> <td style="width: 60%;"></td> </tr> <tr> <td>Company name (if applicable)</td> <td></td> </tr> <tr> <td>Postal / business address</td> <td></td> </tr> <tr> <td>Phone (fixed line):</td> <td></td> </tr> <tr> <td>Email address</td> <td></td> </tr> </table>	An individual	Title	Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Ms <input type="checkbox"/>	Other:			Name(s)						A body corporate or other entity formed at law (include ACN)	<b>FMR Investments Pty Ltd</b>		<b>ACN 009 411 349</b>	Contact person & position (if applicable)		Company name (if applicable)		Postal / business address		Phone (fixed line):		Email address	
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<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>		<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;"><b>Yes</b></td> <td style="text-align: center;"><b>No</b></td> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>	<b>Yes</b>	<b>No</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>																							
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