

# Application to Vary a Delivery Share

Form 35

Application Number
<b>DSV</b>
Office use only

## Delivery Share Details

This application is made for and on behalf of the landowners whose names appear below. The Rate and Determined Flow Rate requested is dependent on there being sufficient capacity in the delivery system.

### Delivery Share Number

<b>D</b>	<b>S</b>	<b>E</b>						
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- 1 Delivery Share Type
- Standard
  - Other (If other describe type) \_\_\_\_\_

- 2 Reason for Application
- Apportion Rate and/or Determined Flow Rate between service points
  - Increase Rate and/or Determined Flow Rate
  - Decrease Rate and/or Determined Flow Rate (Part or full termination)

3 Current Rate Requested Rate after variation

ML/Day	ML/Day
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- 4 List Service Point(s), current Rate and Determined Flow Rate (ML/Day), and requested Rate and Determined Flow Rate after variation

	<i>Service Point No.</i>	<i>Current Rate (ML/Day)</i>	<i>Requested Rate after variation (ML/Day)</i>	<i>Current Determined Flow Rate (ML/Day)</i>	<i>Requested Determined Flow Rate after variation (ML/Day)</i>
i					
ii					
iii					
iv					
v					
vi					
vii					
viii					
ix					
x					
xi					
xii					
xiii					
xiv					

#### Protecting your privacy

Goulburn-Murray Water (G-MW) protects your privacy by collecting and handling your personal information in accordance with the requirements of the Privacy and Data Protection Act 2014. Your personal information is collected on this form under the provisions of the Water Act 1989 and will be used for the purpose of administering this application and updating the Victorian Water Register. Information collected on this form may be made publicly available via the Victorian Water Register. You may apply to G-MW to restrict public access to all or some of your personal information. Information collected is usually disclosed to staff involved in processing your application, Connections Project staff, contractors and other relevant G-MW staff. Failure to provide the information sought may result in processing delays or non acceptance of your application. It may also limit our ability to be able to provide various programs or services. You may gain access to and correct your personal information. For further information please refer to our Privacy Policy at [www.gmwater.com.au](http://www.gmwater.com.au) or call 5826 3500 to obtain a copy of this policy. DM# 2987245

## Name and Signatures of Land Owners

6 Please print name in full and in capital letters. All registered owners of the land must sign. If there are more than four owners or the owner is a company please ensure that the attached annexure is also completed. Please note all notices will be sent to the postal address of the first named person.

	<b>Given Name(s)</b>	<b>Surname</b>		<b>Signature</b>
i.	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>		<input style="width: 95%;" type="text"/>
<b>Postal Address:</b>				
<b>Date:</b>			<b>Phone Number:</b>	
<input style="width: 95%;" type="text"/>			<input style="width: 95%;" type="text"/>	
	<b>Given Name(s)</b>	<b>Surname</b>		<b>Signature</b>
ii.	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>		<input style="width: 95%;" type="text"/>
<b>Postal Address:</b>				
<b>Date:</b>			<b>Phone Number:</b>	
<input style="width: 95%;" type="text"/>			<input style="width: 95%;" type="text"/>	
	<b>Given Name(s)</b>	<b>Surname</b>		<b>Signature</b>
iii.	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>		<input style="width: 95%;" type="text"/>
<b>Postal Address:</b>				
<b>Date:</b>			<b>Phone Number:</b>	
<input style="width: 95%;" type="text"/>			<input style="width: 95%;" type="text"/>	
	<b>Given Name(s)</b>	<b>Surname</b>		<b>Signature</b>
iv.	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>		<input style="width: 95%;" type="text"/>
<b>Postal Address:</b>				
<b>Date:</b>			<b>Phone Number:</b>	
<input style="width: 95%;" type="text"/>			<input style="width: 95%;" type="text"/>	

## Lodging Party (If Applicable)

7 To be used if a third party assisted in coordinating the application.

<b>Given Name(s)</b>	<b>Surname/ Company Name</b>										
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>										
<b>Postal Address:</b>											
<input style="width: 95%;" type="text"/>											
<b>Ph No:</b>	<b>Lodging Party ID:</b>										
<input style="width: 95%;" type="text"/>	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">P</td> <td style="width: 20px; text-align: center;">T</td> <td style="width: 20px; text-align: center;">Y</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table>	P	T	Y							
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# Annexure: Name and Signatures of Land Owners

i.	Given Name(s)	Surname	Signature
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Postal Address:		
Date:		Phone Number:	
ii.	Given Name(s)	Surname	Signature
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Postal Address:		
Date:		Phone Number:	
iii.	Given Name(s)	Surname	Signature
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Postal Address:		
Date:		Phone Number:	
iv.	Given Name(s)	Surname	Signature
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Postal Address:		
Date:		Phone Number:	

## To be completed if Company is Land Owner

Name of Company			ABN
<input type="text"/>			<input type="text"/>
Postal address:			
<input type="text"/>			
Given Name(s)	Surname	Signature	Position
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of Company			ABN
<input type="text"/>			<input type="text"/>
Postal address:			
<input type="text"/>			
Given Name(s)	Surname	Signature	Position
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date:	<input type="text"/>	<input type="text"/>	<input type="text"/>

Please return completed form to: [landenquiries@gmwater.com.au](mailto:landenquiries@gmwater.com.au)

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