

Property Owner/s Consent Form where owner is Local or State or Federal Government

This form is used to provide the property owner/s consent to the making of a Water Approval application in accordance with sections 99BRAf or 99BRAU of the South East Queensland Water (Distribution & Retail Restructuring) Act 2009. In the case where a Standard Water Approval application has been submitted, this form also provides the property owner/s consent for Urban Utilities and engaged third parties to access their property with notice for works associated with the Water Approval application, or for a third party to act on their behalf.

Before submitting this form the following requirements must be completed: Property details, Authorised agent (if applicable) & Ownership details – Failure to submit will prevent the application from progressing to assessment.

This form is to be uploaded with your application via the Developer Services Portal or emailed to DevelopmentEnquiries@urbanutilities.com.au quoting the address and/or application number

Minimum information requirements are indicated *

Address of Development location*(e.g. 1 William St & 69 Alice Street, Brisbane City QLD 4000)*

Real Property Description*(e.g. Lot 1 Plan SP287539)*

* If connection is to be made in a road reserve or the land does not officially have a specific Lot & Plan please provide closest real address and Geo location

Identify your role in making this Water Approval Application

- ☐ Property owner's authorised agent (e.g. consultant) - COMPLETE SECTION A
- ☐ Applicant (Property Owner) - COMPLETE SECTION B
- ☐ Power of Attorney - COMPLETE SECTION C (only complete if this form is signed under POA at section B)

Property ownership details in this form must match the proof of ownership documentation

SECTION A: Authorised agent information

Title* First and last name*

Address (including suburb, state and postcode)*

Contact number*

Email address*

Company/entity name (if applicable)

ABN/ACN (if applicable)

Your position*

Signature* *Must be a digital or wet signature. Typed names will not be accepted*

Date*

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SECTION B: Applicant/Local, State or Federal Property Owner details and consent. Information must not match authorised agent details. Proof of ownership - Please provide one of the following

- ☐ Current Title Search (dated within 3 months & where one is able to be obtained); or
☐ Official letter stating ownership over the parcel of land (where no official title search is able to be obtained)

Lease agreement - If under a lease from Local, State or Federal Government please provide the following

- ☐ Lease Agreement (if property is leased from Local, State or Federal Government)

Authorisations - at least one of the following must be met

- ☐ The names, titles and signatures of the Secretary and Deputy Secretary
☐ The name, title and signature of two Project Leads authorised to sign
☐ The name, title and signature of the Tenant/s - (if leased by a club or other similar organisation then the President and Secretary must sign)

I hereby consent to the making of a Water Approval application in accordance with Urban Utilities' Water Netserv Plan Connections Policy and section 99BRAf or 99BRAU of the South East Queensland Water (Distribution & Retail Restructuring) Act 2009 by the applicant on the premises described above for the purpose of a Water Approval application.

Government Branch/Entity or Lessee of Govt owned land*

Authorised Government representative full name* Role*

Signature* Must be a digital or wet signature. Typed names will not be accepted

Date*

Authorised Government representative full name* Role*

Signature* Must be a digital or wet signature. Typed names will not be accepted

Date*

Address of Authorised Government representative (including suburb, state and postcode)*

Contact number*

Email address*

ABN/ACN (if applicable)

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SECTION C: Power of Attorney details and consent. Information must not match authorised agent details.

Where Power of Attorney has been authorised, this section is to be completed along with section B.

☐ A scan of the original or certified copy of the Power of Attorney document is attached

Name of Attorney/s*

Address (including suburb, state and postcode)*

Contact number*

Email address*

ABN/ACN (if applicable)

☐

By signing the relevant sections as Attorney for the Applicant/Owner, I/we declare that no notice of revocation or suspension of the Power of Attorney has been received.