

Somerset Regional Council

2 Redbank Street Esk
PO Box 117,
ESK QLD 4312

Telephone (07) 5424 4000 Facsimile (07) 5424 4099

Email mail@somerset.qld.gov.au

Website www.somerset.qld.gov.au



Somerset
REGIONAL COUNCIL

Application for Registration

OPERATION OF AN ENVIRONMENTALLY RELEVANT ACTIVITY (ERA)

**Environmental
Protection Act 1994
- Section 73D**

If you have any specific enquiries regarding how to complete this form please contact Council's Environmental Health Section on (07) 5424 4000.

Collection Notice: Council requires the personal information requested on this form for the purpose of assessing your application and administering licenses and approvals in the Region. The information will not be disclosed to any other party unless required by law.

Application Type Please tick where applicable)

- New ERA subject to a development approval**
- Multiple new or existing ERA/s on a single registration certificate**
- Continuation of Registration** (Complete details below)

Existing registration number: _____

Current registered operators full name:

Current registered operators
signature: _____

**See Fees and Charges
for application fees**

Applicant/s details

**If applicant is a
company, insert
company name and
ACN / ARBN**

Company name _____ ACN / ARBN _____

OR

Title Mr Mrs Ms Miss Other (specify) _____

Family name _____

Given names _____

Position _____

**If the applicant is an
individual or partnership,
complete individual
details.**

**Complete if more than
one applicant.**

Title Mr Mrs Ms Miss Other (specify) _____

Family name _____

Given names _____

Position _____

**Contact person for
activity i.e manager.**

Contact details

Contact person: _____

Postal address: _____

Locality / Suburb: _____

Contact ph.: _____

Mobile: _____

Contact fax: _____

Email: _____

<p>Please provide details for the environmentally relevant activity.</p> <p>If address is the same as street address, write 'As Above'</p>	Business details		
	Company name:	ACN / ARBN:	
	Business name:	ABN:	
	Real property description:		
	Street address:		
	Postal address:		
	Contact ph.:	Mobile:	
	Contact fax:	Email:	
<p>Details of the activity/ activities being undertaken.</p> <p>If there is no threshold for the activity, write 'N/A'</p>	Activity information		
	ERA Number:		
	Threshold:		
	Address that activity is being undertaken:		
	Real property description	Lot:	Plan:
	Additional information (if any)		
Applicant's suitability			
<p>Have you ever:</p> <ul style="list-style-type: none"> Received a Penalty Infringement Notice, Environmental Protection Order, restraint order or been convicted of an offence under the Environmental Protection Act 1994? <input type="checkbox"/> No <input type="checkbox"/> Yes (attach full details) Been convicted of an environmental offence under legislation in another state of country? <input type="checkbox"/> No <input type="checkbox"/> Yes (attach full details) 			
Declaration			
<p>Note: If you have not told the truth in this annual return you may be liable for prosecution under the relevant Acts or Regulations.</p> <p>I do solemnly declare that the information provided is true and correct to the best of my knowledge and I make this solemn declaration conscientiously believing the same to be true and by virtue of the provision of the <i>Oaths Act 1867</i>.</p> <ul style="list-style-type: none"> I understand that all information supplied on or with this application may be disclosed publicly in accordance with the <i>Right to Information Act 2010</i> and the <i>Evidence Act 1977</i>. I am aware that I must not operate without a valid development approval for the environmentally relevant activity or (where applicable) must comply with the relevant code of environmental compliance. <p>I will take all reasonable and practical measures to comply with the relevant environmental requirements, including the conditions that apply to the activity I will be carrying out and the general environmental duty.</p>			
Signature of Applicant/s			
I/We the applicants stated on page one of this application certify that the above information and the information on any attachments, to the best of my knowledge, is true and correct.			
Signature _____ <small>(Individual or Corporation/incorporated Association)</small>		Date	/ /
Signature _____ <small>(Second Individual, if applicable)</small>		Date	/ /
Term of registration	If granted, this registration certificate will continue in force unless otherwise specified by applicant or Council (or unless cancelled or suspended).		
Office use only			
Application fee:	\$	Receipt no.:	
Due date:		Date:	
Receipt to:		Return:	Environmental Health Section

Please Note: This application form and any applicable fees must be lodged at Somerset Regional Council by one of the following options:

Option 1: In person

Esk Administration Office, 2 Redbank Street, Esk

OR

Lowood Branch, Cnr Main and Michel Streets, Lowood

OR

Kilcoy Branch, Kennedy Street, Kilcoy

Option 2: By mail

Somerset Regional Council

PO Box 117

ESK QLD 4312