Application form

Application for pre-lodgement services

This approved form is to be used when applying for a pre-lodgement meeting, pre-design meeting or pre-lodgement advice with the Department of Environment and Science regarding applications that are not related to an environmental authority.

Important information for applicants

The Department of Environment and Science (the department) encourages clients to request a pre-lodgement meeting prior to formal application. Pre-lodgement meetings are a service made available by the department to discuss early concepts (pre-design) to determine the feasibility of the proposed project or in order to seek direction and advice on whether a proposed application will meet the legislative application requirements. This service can improve the quality of applications and may reduce delays and un-anticipated problems associated with applications.

This form should **not** be used for pre-lodgement for development applications proposed to be made under the *Planning Act 2016*. Pre-lodgement for these applications must be arranged through the Department of Infrastructure, Local Government and Planning, go to [www.dilgp.qld.gov.au](http://www.dilgp.qld.gov.au) for more information.

Commercial and confidential information must be marked clearly. All information supplied on or with this application form may be disclosed publicly in accordance with the *Right to Information Act 2009* and the *Evidence Act 1977*.

**When to use this form**

You should use this form if you want to discuss applications relating to coastal, heritage, wildlife or any other application type that does not relate to an environmental authority. Do not use this form if you wish to discuss an environmental authority. For environmental authority pre-lodgement applications use the form “ESR/2015/1664” which can be accessed on [www.business.qld.gov.au](http://www.business.qld.gov.au) using the document number as a search term.

**The fields marked with an asterisk \* are mandatory**

**Privacy statement**

The department is committed to protecting the privacy, accuracy and security of your personal information in accordance with the *Information Privacy Act 2009*. The department is collecting the information on this form to tailor pre-lodgement services to best facilitate your application. This information will only be accessed by authorised employees within the department and will not be disclosed to any other parties unless authorised or required by law. For queries about privacy matters please email [privacy@des.qld.gov.au](mailto:privacy@des.qld.gov.au) or telephone: 13 QGOV (13 74 68).

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| **OFFICIAL USE ONLY**  DATE RECEIVED   |  |  |  | | --- | --- | --- | |  |  |  |   FILE REF   |  | | --- | |  |   PROJECT REF   |  | | --- | |  |   COMPLETE FORM  ENTERED BY [SIGNATURE]   |  | | --- | |  |   DATE   |  |  |  | | --- | --- | --- | |  |  |  |   **GUIDE**   1. The ‘applicant’ is the persons, or corporation (not a business trading name) intending to carry out the activity and in whose name the applicable permits or licences are to be issued. 2. If the applicant is a corporation, enter name and title of the principal contact person for the application (e.g. John Jones, Managing Director).   Please make sure the contact details provided are those by which you can be contacted on a daily basis. | Applicant details  |  |  |  | | --- | --- | --- | | \* FULL NAME OF INDIVIDUAL OR ORGANISATION NAME  Click or tap here to enter text. | | | | ARE YOU SUBMITTING THIS APPLICATION AS AN INDIVIDUAL, ON BEHALF OF A COMPANY OR AN ORGANIZATION? | | | | Individual | Company | Local government, State government, utility organisation, or Government owned corporation. | | ABN/ACN (IF APPLICABLE)  Click or tap here to enter text. | | | |
| Contact person  |  | | --- | | CONTACT PERSON (IF DIFFERENT TO APPLICANT)  Click or tap here to enter text. | | POSITION TITLE (IF APPLICABLE)  Click or tap here to enter text. | |
| Address and contact details  |  |  | | --- | --- | | \* FULL POSTAL ADDRESS  Click or tap here to enter text. | | | PHONE  Click or tap here to enter text. | MOBILE  Click or tap here to enter text. | | \* EMAIL  Click or tap here to enter text. | | |
|  | Departmental communication  |  |  | | --- | --- | | HAVE YOU ALREADY ENGAGED IN PRE-LODGMENT OR COMMUNICATED WITH ANY OTHER QUEENSLAND GOVERNMENT DEPARTMENT ON THIS PROPOSAL? | | | No |  | | Yes | IF YOU ANSWERED YES, PLEASE PROVIDE DEPARTMENT NAME(S)  Click or tap here to enter text. | |
|  | Application details  | \* WHAT DOES THE PROPOSED APPLICATION RELATE TO? | | | --- | --- | | Coastal | Other Click or tap here to enter text. | | Heritage | Unknown Click or tap here to enter text. | | Wildlife |  | |
| Description Briefly describe the proposal including any options being considered. Please indicate where there is scope for project modification. Technical reports or other planning work may be helpful in resolving issues about feasibility. Briefly describe the processes of your project as they relate to energy and water use and waste outputs and any other environmental issues that may be affected by the project. Attach any relevant information. | | |
| |  | | --- | | \* DESCRIPTION  Click or tap here to enter text. | | | |
| I have attached additional relevant information (if required). | | |
| Proposed site location(s) Describe project location or proposed project location(s). Give as much information as possible to accurately locate the site(s), such as maps with contextual or boundary lines on plan or GPS boundary co-ordinates. Include surrounding areas and attach any relevant information. | | |
| |  | | --- | | \* DESCRIPTION  Click or tap here to enter text. | | | |
| I have attached additional relevant information (if required). | | |
| Declaration I understand that all information supplied on or with this application form may be disclosed publicly in accordance with the *Right to Information Act 2009* and the *Evidence Act 1977*. I have checked that I have the authority to act on behalf of the applicant to engage in pre-lodgement discussions with the relevant department.   |  |  | | --- | --- | | \* APPLICANT’S NAME  Click or tap here to enter text. | \* APPLICANT’S POSITION  Click or tap here to enter text. | | \* APPLICANT’S SIGNATURE  Click or tap here to enter text. | \* DATE  Click or tap here to enter text. | | | |
| Please return your completed application form and any attachments to:  Permit and Licence Management  Department of Environment and Science  GPO Box 2454  Brisbane QLD 4001  OR  Email: [palm@des.qld.gov.au](mailto:palm@des.qld.gov.au)  **Enquiries**:  Phone: 1300 130 372 (select option 4) | | | |