

Record a change of authority holder following devolution

Form AD11, *Mining Act 1992*



Regional
NSW

Lodgement information

For help with lodging this application, or for more information about authorisations in New South Wales, contact:

Mining, Exploration and Geoscience

Resource Operations

Phone +61 2 4063 6600 (8.30am – 4.30pm)

resource.operations@planning.nsw.gov.au

Note

- any reference to the 'Department' in this form, refers to **Regional NSW**

How to submit this form

- By email:** Send an electronic copy of the form including any attachments to resource.operations@planning.nsw.gov.au
- By mail:** Mail your form and any attachments to Mining, Exploration and Geoscience, Resource Operations, PO Box 344, Hunter Region Mail Centre NSW 2310
- In person:** Submit your application in person at the Department office, 516 High Street, Maitland, New South Wales. Office hours are 8.30am to 4.30pm
- Facsimile:** +61 2 4063 6973

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The information contained in this publication is based on knowledge and understanding at the time of writing (July 2020). However, because of advances in knowledge, users are reminded of the need to ensure that the information upon which they rely is up to date and to check the currency of the information with the appropriate officer of the Regional NSW or the user's independent adviser.

Privacy statement

This information is collected by the Department for the purposes of assessing an application for an authorisation or an application associated with an authority as required by the *Mining Act 1992* or Mining Regulation 2016.

This information may also be used by the Department to confirm applicant details in the event that subsequent applications are made and may also be used to establish and maintain databases to assist the Department with its work generally.

Except for purposes required by law, the information will not be accessed by any third parties in a way that would identify the person without the consent of that person.

You may apply to the Department to access and correct any information the Department holds if that information is inaccurate, incomplete, not relevant or out of date.

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When to use this form

Complete this form if the rights to an application or authority have been devolved to you by an operation of law (such as death, insolvency or bankruptcy of the applicant or holder of that authority/s).

This form has been prepared for the purposes of [s162](#) of the *Mining Act 1992*.

If there is insufficient room in the fields, please provide the information as an attachment.

Important notes

Agents

If this application is lodged by an agent on behalf of the applicant/s, the Department may seek confirmation of the authority under which the agent operates and any limits of that authority. The agent will need to complete the declaration at the end of this form and supply evidence of their appointment, if not already supplied to the Department ([cl97](#) of the Mining Regulation 2016).

How to submit this form

Refer to the cover page for details.

Next steps

Once your application to the Secretary is received, it will be considered by the Minister. We will notify you in writing of the outcome of your application.

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1 Name of existing authority holder

Provide the full name of the existing authority holder and if applicable, the ACN or ARBN (for foreign companies).

Existing authority holder	
Name	
Contact phone	
Contact email	
ACN / ARBN	
Street address (Registered street address for a company)	
Postal address	<input type="checkbox"/> Same as above

2 New person/s to be recorded as authority holder/s following devolution

To be eligible to hold an authority, you must be a person 18 years of age or older, or a company eligible to undertake business in New South Wales. Provide the full name of applicant/s, contact details and if applicable, the ACN or ARBN (for foreign companies).

If the applicant/s is a foreign entity, provide proof that the applicant/s is authorised to operate and carry out business in New South Wales.

1 st Person to be recorded	
Name	
	<input type="checkbox"/> This is an individual and is at least 18 years old.
Contact phone	
Contact email	
ACN / ARBN	
Street address (Registered street address for a company)	
Postal address	<input type="checkbox"/> Same as above

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2 nd Person to be recorded	
Name	<input type="checkbox"/> This is an individual and is at least 18 years old.
Contact phone	
Contact email	
ACN / ARBN	
Street address (Registered street address for a company)	
Postal address	<input type="checkbox"/> Same as above

3 rd Person to be recorded	
Name	<input type="checkbox"/> This is an individual and is at least 18 years old.
Contact phone	
Contact email	
ACN / ARBN	
Street address (Registered street address for a company)	
Postal address	<input type="checkbox"/> Same as above

Additional applicants

Provide the full name, contact details, ACN or ARBN (for foreign companies), street address (individual), registered street address (company) and postal address details of additional applicants. For individuals you must provide a statement that the person is at least 18 years old.

Additional applicants

3 Authority/s affected by the devolution

Type - eg EL, AL, ML	Number	Act

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4 Evidence of devolution

Provide evidence of devolution (eg certified copies of court orders, probate and/or letters of administration)

- I have attached evidence of the devolution of rights

5 Contact for this request

Any correspondence in relation to this request will be sent to this person.

Contact details	
Contact name	
Position held	
Company	
Postal address	
Phone (incl area code)	
Mobile	
Email	

Your preferred contact method

- Email (for companies - provide a company email address which is regularly monitored rather than an individual employee's email address)
- Mail (including DX)

6 Checklist of items to be included with this application

Item		Reference
For foreign entities, proof that the applicant/s is authorised to operate and carry out business in New South Wales.	<input type="checkbox"/>	Question 2
Statement that individual applicants are at least 18 years old	<input type="checkbox"/>	Question 2
Evidence of devolution	<input type="checkbox"/>	Question 4
For agents only – evidence of appointment as agent, if this has not been previously supplied to the department	<input type="checkbox"/>	Question 7

7 Declaration

This form should be signed by the applicant/s (in the case of a company a duly authorised officer) or an agent authorised to act on behalf of the applicant/s.

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7.1 Applicant/s (individual or company)

For each applicant (signed below):

I certify that the information provided is true and correct to the best of my knowledge and belief. I understand under the *Crimes Act 1900 NSW* Part 5A, that knowingly or recklessly giving false or misleading information is a serious offence, and under the *Mining Act 1992* section 378C, any person who provides information that the person knows to be false or misleading is guilty of an offence, for which they may be subject to prosecution.

(For companies only) In addition to the declaration above, by signing below, I **also** certify that I am authorised to complete and provide the information in this form on behalf of the company listed in section 2 of this form.

1 st Applicant details	
Name	
Position/title	
Date	
Signature	

2 nd Applicant details	
Name	
Position/title	
Date	
Signature	

3 rd Applicant details	
Name	
Position/title	
Date	
Signature	

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7.2 Agent authorised to act for this applicant/s

Evidence of appointment is required if this has not been previously supplied to the Department.

Agent details	
Name	
Position/title	
Date	
Signature	

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Office/Administrative use only

Application received:	
Time:	Date:
Officer's Name	
Signature	

Document control

Approved by: Executive Director, Resource Operations, Regional NSW under delegation from the Minister administering the *Mining Act 1992*.

CM9 Reference: DOC20/442526

Amendment schedule		
Date	Version #	Amendment
July 2020	1.0	New format for Regional NSW. Form updated to reflect new Departmental name and branding, and updated links.