

# Application to register a new interest or amend or cancel an existing interest in an authority



Regional  
NSW

Form AD9 *Mining Act 1992*

## 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](mailto: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 and proof of payment to [resource.operations@planning.nsw.gov.au](mailto:resource.operations@planning.nsw.gov.au)
- By mail:** Mail your form, any attachments and proof of payment 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access and correct any information the Department holds if that information is inaccurate, incomplete, not relevant or out of date.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 to request the registration of a new legal or equitable interest in an authority, or the cancellation or amendment of an existing legal or equitable interest in an authority in the public register.**

This form has been prepared for the purposes of [s161](#) of the *Mining Act 1992*.

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

## Important notes

Any person claiming a legal or equitable interest in an authority may apply for registration of the interest.

### 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).

### Fees

Fees are payable on a registration of a new interest only.

### How to submit this form

Refer to the cover page for details.

### Next steps

Once your application has been lodged with the Secretary, it will be considered. You will be notified in writing of the registration, cancellation or amendment of the legal or equitable interest.

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## 1 Authority/s the interest is or should be recorded against

Type - eg EL, AL, ML	Number	Act

## 2 Individual or company registering a new interest, or amending or cancelling the interest

Provide the full name, contact details, registered street address, postal address details and if applicable, the ACN or ARBN (for foreign companies).

1st Individual or company details	
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

2nd Individual or company details	
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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## 3<sup>rd</sup> Individual or company details

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 person/s or company/s

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 person/s or company/s creating the interest.

## Additional person/s or company/s

## 3 Contact for this application

Any correspondence in relation to this application 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)

## 4 Type of request

### 4.1 Specify if the interest is to be created, amended or cancelled

**I am registering a new interest and the details are listed below:**

<input type="checkbox"/>	Agreement date	
	Name of agreement	

**I am amending an existing interest and the details are listed below:**

<input type="checkbox"/>	Agreement date	
	Name of agreement or	
	Dealing number (if known)	

**I am cancelling an existing interest and the details are listed below:**

<input type="checkbox"/>	Agreement date	
	Name of agreement or	
	Dealing number (if known)	

### 4.2 Attach a copy of evidence to support the request

For the creation of a new interest:

- Yes – I have attached a copy of the interest to this application

For the amendment of an interest:

- Yes – I have attached a copy of the amendment to the interest to this application

For the cancellation of an interest:

- Yes – I have attached a copy of the evidence that the interest no longer exists to this application

### 4.3 If creating or amending an interest, explain the objective of the interest

**Objective of the interest**

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## 5 Details of all parties to the interest

Provide the full name, contact details, registered street address, postal address details of all parties recorded on the interest, and if applicable, the ACN or ARBN (for foreign companies).

1 <sup>st</sup> Details of parties to the interest	
Name	
Contact phone	
Contact email	
ACN / ARBN	
Street address (Registered street address for a company)	
Postal address	<input type="checkbox"/> Same as above

  

2 <sup>nd</sup> Details of parties to the interest	
Name	
Contact phone	
Contact email	
ACN / ARBN	
Street address (Registered street address for a company)	
Postal address	<input type="checkbox"/> Same as above

  

3 <sup>rd</sup> Details of parties to the interest	
Name	
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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## Additional person/s or company/s

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 person/s or company/s recorded on the interest.

Additional person/s or company/s

## 6 Fee payment

### 6.1 Fees are payable on a registration of a new interest only

Payment, proof of payment or details that allow the payment to be made must accompany this application form.

### 6.2 Fees

- the application fee amount is \$250 per registration of a new interest only

### 6.3 Select your payment method

Select	Payment Method										
<input type="checkbox"/>	<b>Direct deposit</b> Account name: Department of Regional NSW BSB: 032 001 Account number: 183837 Reference: AGR [authority type and number] (eg AGR EL1234) If you are paying by direct deposit, attach a copy of the receipt issued by your banking authority as evidence that you have paid.										
<input type="checkbox"/>	<b>Credit card*</b> (enter details below) <table border="1"><tr><td>Payment amount*</td><td>\$</td></tr><tr><td>Type of card*</td><td></td></tr><tr><td>Cardholder's name:</td><td></td></tr><tr><td>Card number:</td><td></td></tr><tr><td>Expiry date (mm/yy):</td><td></td></tr></table> <p>*Credit card merchant fees are applicable to all credit card payments and will be added to the payment amount at the following rates:                                 Visa &amp; Mastercard: 0.4%                          Amex: 1.4%</p>	Payment amount*	\$	Type of card*		Cardholder's name:		Card number:		Expiry date (mm/yy):	
Payment amount*	\$										
Type of card*											
Cardholder's name:											
Card number:											
Expiry date (mm/yy):											

## 7 Checklist of items to be included with this application

Item		Reference
Evidence to support the request	<input type="checkbox"/>	Question 4
For payments made by direct deposit – proof of payment	<input type="checkbox"/>	Question 6
For agents only – evidence of appointment as agent, if this has not been previously supplied to the Department	<input type="checkbox"/>	Question 8

## 8 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.

### 8.1 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 <sup>st</sup> Applicant details	
Name	
Position/title	
Date	
Signature	

2 <sup>nd</sup> Applicant details	
Name	
Position/title	
Date	
Signature	



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3 <sup>rd</sup> Applicant details	
Name	
Position/title	
Date	
Signature	

## 8.2 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	
<b>Application fee amount:</b> \$250 (per new interest per application)	
Fee amount	\$
<b>Total amount:</b>	\$
<b>Receipt number</b>	

## For credit cards

Following confirmation of payment, remove the first eight digits of the credit card number from this form. Ensure that any saved copy does not include full credit card details.

## Document control

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

CM9 Reference: DOC20/442530

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.