

## **Protection zone determination application**

## This is a statutorily approved form and may not be amended.

An asterisk indicates a mandatory field. Your application may be invalid if mandatory fields are not completed.

Part 1– Details of person making the application						
First I	t Name: *			Surname: *		
Organisation:				Position Title:		
Email: *				Contact number: *		
Business address:						
City:				State:		
Postc	ode:					
Part 2- Nominated contact person						
Use the above						
Name:				Surname:		
Organisation:				Position title:		
Email:				Contact number:		
Business address:						
City:				State:		
Postc	ode:					
Part 3– Licence identification						
Licence number: *						
Part 4– Attachments						
1.	Completed protection zone application supporting details: *					
2.	Consultation summary report: *					
3.	Location Map (file size preferably no larger than 2MB in a JPG (.jpg, .jpeg) or PNG (.png) format: *					



Part 5– Application fee				
Application fee paid: *				
I acknowledge that, in addition to the application fee, a protection zone determination assessment fee may also be payable as set out under the Offshore Electricity Infrastructure Regulations 2022.				
Part 6 – Applicant declaration				
I acknowledge that I understand that supplying false or misleading information to a Commonwealth entity is an offence under the Criminal Code Act 1995* $\square$				
I hereby apply	for a protection zone determination under the Offshore			
Electricity Infrastructure Regulations 2022*.				