

Form SST14, 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
Lightning Ridge Office
Phone +61 2 6820 5200
Fax +61 2 6829 0825

lightningridge.office@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 lightningridge.office@planning.nsw.gov.au
- By mail: Mail your form and any attachments to Mining, Exploration & Geoscience, Resource Operations, PO Box 314, Lightning Ridge NSW 2834
- By fax: Fax your form and any attachments to +61 2 6829 0825
- In person: Submit your application in person at the Department Office, Shop 1, 3 Morilla Street, Lightning Ridge, New South Wales. Office hours are 9.30am to 4.00pm Mon-Thurs, 9.30am to 1.00pm Friday.

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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 information upon which they rely is up to date and to check currency of the information with the appropriate officer of the Department or the user's independent advisor.

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access and correct any information the Department holds if that information is inaccurate, incomplete, not relevant or out of date.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

This form is to be completed by holders of a small-scale title to notify of a change of address.

Important notes

Accompanying documentation

Any information or document that is required to accompany this application should be lodged within 10 business days of the lodgement date.

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).

Next steps

We will notify you in writing once this notification form is processed.



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1	Details of the small-scale titleholder notifying of change
	of address

Titleholder details		
Name		
ACN / ARBN		

2 Previous contact and address details

Previous details	
Phone (incl area code)	
Mobile	
Fax	
Email	
Street address (Registered street address for a company)	
Postal address	

3 New contact and address details

New details	
Name	
Phone (incl area code)	
Mobile	
Fax	
Email	
Street address (Registered street address or a company)	
Postal address	

4 Small-scale title number/s held by the titleholder

Title number/s		
Mineral claim number/s		
Opal prospecting licence number/s		



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5 Declaration

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

5.1 Applicant/s (individual or company)

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 <u>also</u> certify that I am authorised to complete and provide the information in this form on behalf of the company listed in section 1 of this form.

Applicant details	
Name	
Position/title	
Date	
Signature	

5.2 Agent authorised to act for this applicant

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: DOC20/487767

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.