**A**boriginal Heritage Impact Permit Variation Application Form

This is an application to vary an Aboriginal heritage impact permit (AHIP) under section 90D of the *National Parks* *and Wildlife Act 1974* (NPW Act).

A variation includes the substitution, omission or amendment of an existing condition, or attaching a new condition to an AHIP. If an AHIP holder wishes to seek a variation to the conditions of their AHIP, this application form needs to be filled in. You can also refer to [Applying for an Aboriginal Heritage Impact Permit - Guide to Applicants](https://www.environment.nsw.gov.au/research-and-publications/publications-search/applying-for-an-aboriginal-heritage-impact-permit-guide-for-applicants)for guidance.

If you need any help filling out this form, please contact Heritage NSW Customer Concierge
on 02 9873 8500.

Once completed and signed, email this form, together with applicable fee, to: heritagemailbox@environment.nsw.gov.au.

Heritage NSW will then make a determination as to whether the variation(s) can be made. Please note that if your application is incomplete you may be requested to provide further information. If the information in your application is so insufficient that an assessment cannot be made, we may decide to refuse the application. You will be given notice of this proposed refusal.

**Note**: If you wish to transfer this AHIP, in addition to varying the AHIP conditions, you will need to apply to Heritage NSW separately using an AHIP Transfer Application form and supply any required additional information. An AHIP Variation Application will either need to be submitted to Heritage NSW prior to a transfer by the current AHIP holder, **or** by the new AHIP holder after a transfer has been granted by Heritage NSW. Heritage NSW cannot process a transfer application and a variation simultaneously, as only the AHIP holder can apply for a variation. See the Heritage NSC website or contact us for more information on AHIP transfers phone 02 9873 8500

# 1. Details of AHIP to be varied

## 1.1 AHIP number

|  |  |
| --- | --- |
| AHIP number |  |

## 1.2 Name of current AHIP holder(s)

|  |  |
| --- | --- |
| Full name of AHIP holder(s) |  |
| ACN/ABN (if applicable) | ACN | ABN |
| Address\* | No: | Street name: |
| Suburb: | State: | Postcode: |

\*Must be the registered business address as it appears in the ASIC register, for companies or individuals with an ABN.

# 2 Proposed changes required to the AHIP

|  |  |  |
| --- | --- | --- |
| Please check (☒) the box for ‘Yes’ or ‘No’ to indicate which changes are applicable. | **Yes**  | **No** |
| **Timeframes** | The timeframes for undertaking the actions under the AHIP have changed and I request that these are reflected in the AHIP (See Section 2.1) | [ ]  | [ ]  |
| **Actions** | I am applying to change the actions that are carried out under this AHIP (see section 2.2) Note: if the changes sought are substantial, you may need to apply for a new AHIP | [ ]  | [ ]  |
| **Area of land** | To vary the AHIP area of land within the existing AHIP boundary and my original AHIP application included information about how I assessed and consulted on the likely impacts on that area.  | [ ]  | [ ]  |
| **Other** | Other changes not listed above are requested | [ ]  | [ ]  |

## 2.1 Changes to timeframes

Please detail and provide justification for any changes required to the timeframes already outlined in the AHIP, including any extension of the time period of the AHIP.

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|  |

Please attach extra page(s) if more space is needed.

## 2.2 Changes required to the current AHIP

Your AHIP can be varied by deleting or amending a condition or substituting one condition for another. Please provide detail of any other proposed variations required which are not covered previously in this application. All proposed changes must be justified. Please note if changes are substantial, a new AHIP may be required.

**Note:** If change of conditions relates to changes to temporary storage or permanent storage management of Aboriginal objects, we need further information about the new storage location, landowner’s permission, reason for change, and a care agreement application.

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| --- | --- | --- |
| **AHIP condition no.**  | **Details of proposed change** | **Reason for proposed change** |
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|  |  |  |
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|  |  |  |
|  |  |  |

Please attach extra page(s) if more space is needed.

If additional actions are proposed, please answer the following question

|  |  |
| --- | --- |
| **When are these additional actions intended to commence?** | DD/MM/YYYY |

## 2.3 Varying original boundary

If you are applying for the AHIP to cover area not in the original AHIP.

Describe and include a topographic map clearly showing:

1. The location of the land that is currently subject to the AHIP, and
2. The new area that is the subject of this AHIP variation application (aerial photographs, detailed site maps and title plans may also be provided

The map should provide clear cadastre information including a lot and DP number, the local government area, parish and zone (as applicable).

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|  |

Please attach extra page(s) if more space is needed.

## 2.4 Details of other changes required

Write down a description of the other changes that you are applying for, which would allow you to carry out the actions that are not currently covered under your existing AHIP.

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# 3. Development consent – Only needed if variation is a result of change in development

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| --- | --- | --- |
| Please check (☒) the box for ‘Yes’ or ‘No’ – original AHIP | **Yes** | **No** |
| Was the original AHIP issued as part of the integrated development approvals process under the *Environmental Planning and Assessment Act 1979* (EP&A Act)? | [ ]  | [ ]  |
| If YES what date was the development consent granted? | Date: |

**Note:** If the original AHIP was issued as part of an integrated development approval under the EP&A Act in the past 3 years, any variation and conditions of the AHIP cannot be inconsistent with the development consent.

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| --- | --- | --- |
| Please double click on the box and change it to ‘checked’ (☒) for ‘Yes’ or ‘No’ –current proposed variation | **Yes** | **No** |
| Is development consent under the EP&A Act or another approval required (e.g. property vegetation plan or approval under Part 5, EP&A Act)? | [ ]  | [ ]  |
| Has development consent (or other approval) been granted | [ ]  | [ ]  |
| If ‘Yes’ have you attached a copy of the development consent or other approval? | [ ]  | [ ]  |

# 4. Impacts of the variation

|  |  |  |
| --- | --- | --- |
| Please double click on the box and change it to ‘checked’ (☒) for ‘Yes’ or ‘No’ | **Yes** | **No** |
| Does the variation increase harm to Aboriginal objects, when that harm is not already provided for in your existing AHIP? | [ ]  | [ ]  |
| If yes have you consulted in any way on the additional actions or other proposed changes, for example, with the registered Aboriginal parties that were identified during the consultation process for the original AHIP? | [ ]  | [ ]  |

If yes, please attach a copy of any additional evidence of the consultation process you undertook including letters, meeting minutes, submissions or feedback you received.

**Note:** Under the National Parks and Wildlife Regulation 2019, if the Secretary is satisfied that the variation will result in a significant increase in harm to Aboriginal objects or places concerned, the Secretary will require the applicant to carry out additional consultation and determine the form of that consultation.

# 5. Signature of AHIP holder

Under section 90D NPW Act, an AHIP may only be varied on the written application of the holder of the permit. This application may only be signed by a person(s) with the legal authority to sign it. The various ways in which the application may be signed, and the people who may sign the application, are set out in the categories below.

Please double click on the box and change it to ‘checked’ (☒) next to the category that describes how this application is being signed.

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| --- | --- | --- |
| **If the AHIP holder is:** |  | **The application must be signed and certified by one of the following** |
| An individual | [ ]  | The individual AHIP holder or a person approved in writing by Heritage NSW to sign on behalf of the AHIP holder |
| A company | [ ] [ ] [ ] [ ]  | the common seal being affixed in accordance with the Corporations Act 2001, ortwo directors, ora director and a company secretary, orif a proprietary company that has a sole director who is also the sole company secretary – by that director. |
| A public authority otherthan a council | [ ]  | the chief executive officer of the public authority, or their authorised delegate (Please note: a copy of the relevant instrument of delegation must be attached to this application). |
| A local council | [ ] [ ]  | the general manager in accordance with s.377 of the Local Government Act 1993 (LG Act), orthe seal of the council being affixed in a manner authorised under the LG Act. |

I/We (the AHIP holder/s):

* would like to apply for the variation of the AHIP listed in Section 1
* declare that the information in this AHIP variation application form (including any attachments) is not false or misleading.

## Applicant 1 (AHIP Holder)

|  |  |  |  |
| --- | --- | --- | --- |
| Signature |  | Signature |  |
| Name (printed) |  | Name (printed) |  |
| Position(in company or authority) |  | Position(in company or authority) |  |
| Date |  | Date |  |

Seal (if signing under seal):

## Applicant 2 (AHIP Holder)

|  |  |  |  |
| --- | --- | --- | --- |
| Signature |  | Signature |  |
| Name (printed) |  | Name (printed) |  |
| Position(in company or authority) |  | Position(in company or authority) |  |
| Date |  | Date |  |

Seal (if signing under seal):

## Additional information

1. It is an offence under s.169(3) of the NPW Act to knowingly give any information in this form that is false or misleading in a material particular.
2. Payment of the fee, via the payment authorisation form below, must be submitted with your application.
3. Details of the AHIP variation notice will appear on Heritage NSW’s Public Register. Heritage NSW can be asked by any person to provide reasons for refusing or granting an AHIP application.
4. Heritage NSW may make copies of any report provided in relation to this AHIP variation application and may include a copy of the report on the AHIMS register. More information about how to access and use AHIMS is available [online](https://environment.nsw.gov.au/topics/heritage/search-heritage-databases/aboriginal-heritage-information-management-system).
5. If Heritage NSW does not make a determination of the AHIP variation application within 60 days, it is ‘deemed to be refused’. ‘Deemed to be refused’ means that the applicant has the right to challenge Heritage NSW’s decision to refuse the application, in the Land and Environment Court. Note Heritage NSW can still continue to process the application after 60 days and grant or refuse the AHIP variation application. You should always contact Heritage NSW in the first instance if you have any queries regarding your application.

**Once completed and signed, pay the fee and email this form with all supporting information to**: heritagemailbox@environment.nsw.gov.au.

Files that exceed email limits can be submitted using Dropbox. Please share the link with heritagemailbox@environment.nsw.gov.au

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| --- |
| **Payment authorisation** |
| Determining the fee for AHIP variation processing Please indicate the estimated changes to the original proposed development works to determine the relevant administrative fee. Please check applicable fee:

|  |  |  |
| --- | --- | --- |
| **Section 90D AHIP variation** | **Fee** |  |
| Minor changes including timeframes, typographical errors | $80 | [ ]  |
| All other changes | $400 | [ ]  |

\*processing fees are exempt from GST by the Commonwealth Treasurer’s Division 81 determination under *A New Tax System (Goods and Services Tax) Act 1999*How to payPayment options include:* **Direct deposit**: Department of Planning and Environment, BSB 032 001, Account No 186 245. Once payment is made, please include the remittance advice with submission.
* **Credit card** Please provide contact details below for a member of the Customer Concierge Team to contact you and take payment over the phone.
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| **Do you require a receipt?** | **Yes** [ ]  | **No** [ ]  |
| **Company name:** |
| **To the attention of:** |
| **Email:** | **Phone:** |

|  |
| --- |
| **Contact details for credit card payment** |
| **Name on card:** |
| Visa and Mastercard only. American Express is not accepted. |
| **Contact name:** |  |  |  |
| **Contact phone number** |  |

ABN: **27 578 976 844**