



**WATER RESOURCES AUTHORITY**  
ESTABLISHED BY THE WATER RESOURCES ACT, 1995

**RENEWAL OF  
LICENCE TO ABSTRACT AND USE WATER**

**LICENCE NUMBER:** \_\_\_\_\_

**LICENSEE DETAILS**

**Name:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Contact:** \_\_\_\_\_ **Job Title:** \_\_\_\_\_

**Telephone number:** \_\_\_\_\_ **Fax number:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Please indicate the name in which the licence was granted. If the company has been renamed, please so indicate. A new application (using Form A available from WRA) is required if the original licensee has changed e.g. by sale of property, etc. Licences are not transferable*

**LICENCE DETAILS**

**Source Name:** \_\_\_\_\_

**Location:** \_\_\_\_\_

**Abstraction rate (m<sup>3</sup>/day):** \_\_\_\_\_

*If you wish to reduce your abstraction rate, please indicate the new rate. A higher abstraction rate is considered a new application.*

**Use:** \_\_\_\_\_

**Method of abstraction:** \_\_\_\_\_

**Measuring device attached?** Yes  No

**If yes, state type of device:** \_\_\_\_\_

**Abstraction data submitted?** Yes  No

**Important Note:** All terms and conditions indicated on the existing licence are valid for the renewal.

I hereby apply for renewal of the abovementioned licence for an additional five (5) years as of \_\_\_\_\_ I agree to abide by all conditions set out in the original licence.

.....  
Name (please print)

.....  
Signature

.....  
Date