Section A: Location of pegging area

Section, Hundred
Pastoral block
Other
Local Council area

A detailed plan of the location of the pegging area, prepared by a licensed surveyor, must be attached.

The plan must show –
• dimensions and coordinates/bearings of area boundaries; and
• bearings and distances from land boundaries or other known points; and
• the proposed means of access from a public road.

All measurements taken for the purposes of the plan must be taken with a GPS unit or other survey equipment.

Section B: Minerals Sought

Mineral type

Mineral/s sought

Tick one box only. Specify mineral name/s, not just symbol, e.g. “Gold” not “Au”.

Section C: Owners of Land and Notice of Entry

Provide details of the land owner/s within the claim area, and how Notice of Entry (Form 21) was served, in accordance with section 58A of the Act.

Title reference
Owner of land
Date Form 21 served on owner

A copy of each title (less than 3 months old), proving land ownership, must be attached.

Proof of service must be attached.

You must wait at least 21 days from serving the notices to the owners of land before lodging this application with the Mining Registrar.

OR

Provide details of any agreements with owner/s of land to authorise entry, in place of a notice of entry.

A copy of each agreement, signed by all parties, must be attached.
Section D: Reasons for pegging in alternate manner

Provide reasons why approval should be given for this area to be pegged in an alternate manner.

Attach additional information if necessary.

If this application to peg in an alternate manner is approved, the date that this application was lodged with a mining registrar becomes the effective pegging date under the Act.

If approval is given, Form 05 (mineral claim – application for registration) may then be lodged with a mining registrar to register your mineral claim, as per the normal process. Form 05 must be lodged within 14 days of the effective pegging date, unless a longer period is approved.

NOTE: Each party must complete a separate copy of the ‘applicant details’ page and attach to this application.

Section E: Application Checklist

Ensure that the following items are included with your application (where relevant).

<table>
<thead>
<tr>
<th>Section</th>
<th>Item</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Location of pegging area</td>
<td>A detailed plan showing the location of the claim and the coordinates of the pegs, prepared by a licensed surveyor</td>
</tr>
<tr>
<td>C. Owners of Land &amp; Notice of Entry</td>
<td>A copy of each title evidencing ownership of the land, less than 3 months old</td>
</tr>
<tr>
<td></td>
<td>A copy of any agreement waiving notice of entry, signed by all parties involved</td>
</tr>
<tr>
<td></td>
<td>A copy of each notice of entry to land and proof of service</td>
</tr>
<tr>
<td>D. Reasons for pegging in alternate manner</td>
<td>Sufficient detail is provided to explain why approval should be given for pegging in an alternate manner</td>
</tr>
</tbody>
</table>

ATTACHMENT: Applicant details

A separate copy of the ‘applicant details’ page has been completed and attached for each applicant
**MINERAL CLAIM: APPLICANT DETAILS**

**USE THIS FORM TO:** Provide the details of a new client, or provide updated details for an existing client. One company or one individual per page only. No joint names.

<table>
<thead>
<tr>
<th>This applicant’s percentage share</th>
<th>Applicant number</th>
<th>%</th>
<th>of</th>
</tr>
</thead>
</table>

### Applicant type:

- **Company**
  - **Company name**
  - **ABN**
  - **ACN**
  - **Registered address line 1**
  - **Registered address line 2**
  - **Suburb / Locality**
  - **State**
  - **Postcode**

- **Individual**
  - **Surname**
  - **Given names**

### Applicant Contact Details

- **Postal address is the same as company registered address above**
  - **Postal Address Line 1**
  - **Postal Address Line 2**
  - **Suburb / Locality**
  - **State**
  - **Postcode**
  - **Email**
  - **Website**
  - **Telephone**
  - **Fax**

### Contact Person for Queries

- **Contact Name**
- **Position / Role**
- **Email**
- **Telephone**
- **Mobile**

### Certified Correct

- **Name**
- **Signature**

> **Note:** Provide a postal address if it is different to the registered business street address. A contact person must be nominated for each client. May be certified by any appropriate person.