

Form PTD11

# Record a change of title holder or applicant name

*Petroleum (Onshore) Act 1991*

February 2018 | v3.2

## More information

For help with lodging this application, or for more information about titles in New South Wales, contact:

Division of Resources and Energy

**Titles Customer Assistance Line**

**Phone +61 2 4931 6500**

[titles.services@industry.nsw.gov.au](mailto:titles.services@industry.nsw.gov.au)

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The information contained in this publication is based on knowledge and understanding at the time of writing. 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 NSW Department of Planning and Environment or the user's independent advisor.

### Privacy statement

This information is collected by the NSW Department of Planning and Environment for the purposes of assessing an application for or associated with a title as required by the *Petroleum (Onshore) Act 1991* or *Petroleum (Onshore) 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access and correct any information the department holds if that information is inaccurate, incomplete, not relevant or out of date.

## When to use this form

**Complete this form if you hold or have applied for a petroleum title/s in New South Wales and you have changed your name (for individuals) or the company has changed their name but retained the same ACN.**

The form is approved in accordance with [Part 3](#) of the *Petroleum (Onshore) Act 1991*. The information requested in this form may not be specifically referenced in the *Petroleum (Onshore) Act 1991* or *Petroleum (Onshore) Regulation 2016* however its inclusion in the approved form validates the authority of the NSW Department of Planning and Environment (the department) to request it.

## Important notes

If this application is lodged by any party other than the applicant/s (ie. an agent), the department may seek confirmation of that authority and any limits of that authority given to that other party by the applicant ([Section 97F](#) of the *Petroleum (Onshore) Act 1991* and [Clause 34](#) of the *Petroleum (Onshore) Regulation 2016*). 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.

## How to submit this form

- **By email:** Send an electronic copy of the form including any attachments and proof of payment to [titles.services@industry.nsw.gov.au](mailto:titles.services@industry.nsw.gov.au)
- **By mail:** Mail your form, attachments and proof of payment to Division of Resources and Energy, Titles Services, PO Box 344, Hunter Region Mail Centre NSW 2310.
- **In person:** Submit your application in person at the Division of Resources and Energy's Titles Services office, 516 High Street, Maitland, New South Wales. Office hours are 9.30am to 4.30pm.

## How this application will be processed

Once your application has been checked we will update our records accordingly. We will notify you in writing of the outcome.

## 1 Current title holder/s or applicant/s details on record

Provide the current full name of title holder/s or applicant/s and if applicable, the ACN or ARBN (for foreign companies).

Name	<input type="text"/>
ACN/ARBN	<input type="text"/>
Name	<input type="text"/>
ACN/ARBN	<input type="text"/>
Name	<input type="text"/>
ACN/ARBN	<input type="text"/>

## Additional authority holder/s or applicant/s

Provide the full name, ACN or ARBN (for foreign companies), registered street address and postal address details of additional authority holder/s or applicant/s.

<input type="text"/>
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## 2 New details to be registered

For companies, the ACN must remain the same otherwise a transfer of title is required (refer to [PTD2 – Application for approval of transfer of title](#)).

Name	<input type="text"/>
ACN/ARBN	<input type="text"/>
Name	<input type="text"/>
ACN/ARBN	<input type="text"/>
Name	<input type="text"/>
ACN/ARBN	<input type="text"/>

## 3 Evidence of change of name

For companies, provide a copy of the ASIC extract or similar. For individuals, provide a change of name certificate or similar.

I have attached evidence of the change of name.

## 4 Title/s or application/s affected by the change of name

Type –PAL, PEL, PPL, PSPA	Number	Act
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

## 5 Contact for this application

Any correspondence relating to this application will be sent to this person.

Contact name	<input type="text"/>
Position held	<input type="text"/>
Company	<input type="text"/>
Postal address	<input type="text"/>
Phone (inc. area code)	<input type="text"/>
Mobile	<input type="text"/>
Email	<input type="text"/>

### Your preferred contact method

- Email (For companies – provide a generic company email address which is regularly monitored rather than an individual employee’s email address.)
- Mail

## 6 Checklist of items to be included with this application

Item	Reference	
Evidence of change of name	<input type="checkbox"/>	Question 3
For agents only – evidence of appointment as agent, if this has not been previously supplied to the department	<input type="checkbox"/>	Question 8

## 7 Declaration

This form should be signed by the applicant or an agent authorised to act on the applicant's behalf.

I/We declare that the information provided in this application is true and correct. I/We understand that under [Part 5A](#) of the *Crimes Act 1900*, that knowingly giving false or misleading information is a serious offence; and under [Section 125D](#) of the *Petroleum (Onshore) Act 1991* 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.

### Applicant/s

Name	
Position/title	
Date	
Signature	

Name	
Position/title	
Date	
Signature	

Name	
Position/title	
Date	
Signature	

OR

### Agent authorised to act for this applicant/s

Provide evidence of appointment if this has not been previously supplied to the department.

Name	
Position/title	
Date	
Signature	

## Office use only

### Application received:

Time:  Date:

**Titles fee amount:** \$250 (per title)

Fee amount   NREM3095-2  GL: Z4014

**Total fee amount:**

**Total amount:**  **Receipt number:**

## Received under delegation from the Secretary

Name

Signature

## Document control

Approved by: Director Titles Services

RM8 Reference: PUB16/283

### Amendment schedule

Date	Version #	Amendment
31 May 2016	2.0	Components updated (Forms project), new template
30 June 2016	3.0	Addition of question 2 ('new name')
1 April 2017	3.1	Update legislation, hyperlinks, bank details, project codes, dept name
1 February 2018	3.2	Update to DPE colours and removal of fees