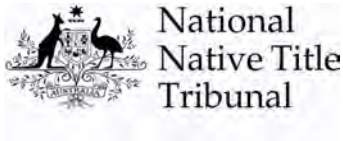


**Schedule 19 – ILUA Application Form**

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# Application Form

## Part A—Application details

<b>1. Short name of agreement</b>	Yamatji Nation Indigenous Land Use Agreement
<b>2. Certified applications</b> (ss 24CG(3)(a), 203BE(1)(b) and (5) and 251A NTA and Reg 7(2)(f) ILUA Regulations)	<p>Is the application for registration certified by all relevant Representative Aboriginal and Torres Strait Islander Bodies (RATSIBs)/Native Title Service Providers (NTSPs) for the agreement area?</p> <p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <hr/> <p>If yes, is a copy of all the required certifications attached to this application?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<b>3. Non-certified applications</b> (ss 24CG(3)(b) and 251A NTA and Reg 7(2)(f) ILUA Regulations)	<p>Have all reasonable efforts (including consulting all RATSIBs/ NTSPs) been made to identify all holders and potential holders of native title for the agreement area and have all those identified authorised the making of the agreement?</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <hr/> <p>Please detail the grounds on which the Registrar should be satisfied that the above requirements have been met:</p> <p><b>[Further details to be inserted prior to lodgement]</b></p>

**Part B—Party details**

<b>4. First party details</b> (s 24CG(1) NTA)	Name	The Yamatji Nation Native Title Claim Group
	Contact Name	Click to enter text
	Postal Address	Click to enter text
	Telephone number	Click to enter text
	Fax number (if available)	Click to enter text
	Email address (if available)	Click to enter text
	Is this party also the applicant?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>Representative's name, address and telephone number (if applicable)</b>	Company Name	Yamatji Marlpa Aboriginal Corporation
	Contact Name	Rodney Nichole
	Postal Address	PO Box 3072, 249 Hay Street, East Perth WA 6892
	Telephone number	(08) 9268 7000
	Fax number (if available)	(08) 9225 4633
	Email address (if available)	rnichole@ymac.org.au
	Contact address for notification?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Contact address for Register entry?	Yes <input type="checkbox"/> No <input type="checkbox"/>

<b>Second party details</b> (s 24CG(1) NTA)	Name	The Southern Yamatji Claim Group
	Contact Name	Click to enter text
	Postal Address	Click to enter text
	Telephone number	Click to enter text
	Fax number (if available)	Click to enter text
	Email address (if available)	Click to enter text
	Is this party also the applicant?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>Representative's name, address and telephone number (if applicable)</b>	Company Name	Yamatji Marlpa Aboriginal Corporation
	Contact Name	Glenn Archer
	Postal Address	PO Box 3072, 249 Hay Street, East Perth WA 6892
	Telephone number	(08) 9268 7000
	Fax number (if available)	(08) 9225 4633
	Email address (if available)	garcher@ymac.org.au
	Contact address for notification?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Contact address for Register entry?	Yes <input type="checkbox"/> No <input type="checkbox"/>	

<b>Third party details</b> (Reg 7(3)(a) ILUA Regulations)	Name	The Mullewa Wadjari Claim Group
	Contact Name	Click to enter text
	Postal Address	Click to enter text
	Telephone number	Click to enter text
	Fax number (if available)	Click to enter text
	Email address (if available)	Click to enter text
	Is this party also the applicant?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>Representative's name, address and telephone number (if applicable)</b>	Company Name	Corser and Corser Lawyers
	Contact Name	Raquel Woodcock
	Postal Address	Level 4, Irwin Chambers, 16 Irwin Street, Perth WA 6000
	Telephone number	(08) 9215 0900
	Fax number (if available)	(08) 9218 9961
	Email address (if available)	raquel.woodcock@corsers.com.au
	Contact address for notification?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Contact address for Register entry?	Yes <input type="checkbox"/> No <input type="checkbox"/>	

<b>Fourth party details</b> (Reg 7(3)(a) ILUA Regulations)	Name	The Hutt River Claim Group
	Contact Name	Click to enter text
	Postal Address	Click to enter text
	Telephone number	Click to enter text
	Fax number (if available)	Click to enter text
	Email address (if available)	Click to enter text
	Is this party also the applicant?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	<b>Representative's name, address and telephone number (if applicable)</b>	Company Name
Contact Name		Glenn Archer
Postal Address		PO Box 3072, 249 Hay Street, East Perth WA 6892
Telephone number		(08) 9268 7000
Fax number (if available)		(08) 9225 4633
Email address (if available)		garcher@ymac.org.au
Contact address for notification?		Yes <input type="checkbox"/> No <input type="checkbox"/>
Contact address for Register entry?		Yes <input type="checkbox"/> No <input type="checkbox"/>

<b>Fifth party details</b> (Reg 7(3)(a) ILUA Regulations)	Name	The Widi Mob Claim Group
	Contact Name	Click to enter text
	Postal Address	Click to enter text
	Telephone number	Click to enter text
	Fax number (if available)	Click to enter text
	Email address (if available)	Click to enter text
	Is this party also the applicant?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>Representative's name, address and telephone number (if applicable)</b>	Company Name	MPS Law
	Contact Name	Michael Pagsanjan
	Postal Address	2/459 Morphett Street, Adelaide SA 5000
	Telephone number	(08) 7221 1690
	Fax number (if available)	(08) 8127 8090
	Email address (if available)	michael@mpslaw.com.au
	Contact address for notification?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Contact address for Register entry?	Yes <input type="checkbox"/> No <input type="checkbox"/>	

<b>Sixth party details</b> (Reg 7(3)(a) ILUA Regulations)	Name	Bundi Yamatji Aboriginal Corporation (ICN 9213)
	Contact Name	Click to enter text
	Postal Address	PO Box 2691, Kent Town SA 5067
	Telephone number	Click to enter text
	Fax number (if available)	Click to enter text
	Email address (if available)	paul@mlcscorporate.com.au
	Is this party also the applicant?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	<b>Representative's name, address and telephone number (if applicable)</b>	Company Name
Contact Name		Click to enter text
Postal Address		Click to enter text
Telephone number		Click to enter text
Fax number (if available)		Click to enter text
Email address (if available)		Click to enter text
Contact address for notification?		Yes <input type="checkbox"/> No <input type="checkbox"/>
Contact address for Register entry?		Yes <input type="checkbox"/> No <input type="checkbox"/>



<b>Seventh party details</b> (Reg 7(3)(a) ILUA Regulations)	Name	Yamatji Southern Regional Corporation (ACN 638 346 684)
	Contact Name	Click to enter text
	Postal Address	PO Box 2691, Kent Town SA 5067
	Telephone number	Click to enter text
	Fax number (if available)	Click to enter text
	Email address (if available)	yamatjicentral@outlook.com
	Is this party also the applicant?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	<b>Representative's name, address and telephone number (if applicable)</b>	Company Name
Contact Name		Click to enter text
Postal Address		Click to enter text
Telephone number		Click to enter text
Fax number (if available)		Click to enter text
Email address (if available)		Click to enter text
Contact address for notification?		Yes <input type="checkbox"/> No <input type="checkbox"/>
Contact address for Register entry?		Yes <input type="checkbox"/> No <input type="checkbox"/>

<b>Eighth party details</b> (Reg 7(3)(a) ILUA Regulations)	Name	State of Western Australia
	Contact Name	Click to enter text
	Postal Address	Department of the Premier and Cabinet, 5 <sup>th</sup> Floor, Dumas House 2 Havelock Street, West Perth WA 6005
	Telephone number	Click to enter text
	Fax number (if available)	Click to enter text
	Email address (if available)	yamatjinationagreement@dpc.wa.gov.au
	Is this party also the applicant?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
<b>Representative's name, address and telephone number (if applicable)</b>	Company Name	State Solicitor's Office
	Contact Name	Sheila Begg
	Postal Address	David Malcolm Justice Centre, 28 Barrack Street, Perth WA 6000
	Telephone number	(08) 9264 1888
	Fax number (if available)	(08) 9264 1440
	Email address (if available)	s.begg@sso.wa.gov.au
	Contact address for notification?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Contact address for Register entry?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

<b>Ninth party details</b> (Reg 7(3)(a) ILUA Regulations)	Name	Minister for Aboriginal Affairs
	Contact Name	Click to enter text
	Postal Address	11 <sup>th</sup> Floor, Dumas House 2 Havelock Street, West Perth WA 6005
	Telephone number	Click to enter text
	Fax number (if available)	Click to enter text
	Email address (if available)	Click to enter text
	Is this party also the applicant?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>Representative's name, address and telephone number (if applicable)</b>	Company Name	State Solicitor's Office
	Contact Name	Sheila Begg
	Postal Address	David Malcolm Justice Centre, 28 Barrack Street, Perth WA 6000
	Telephone number	(08) 9264 1888
	Fax number (if available)	(08) 9264 1440
	Email address (if available)	s.begg@sso.wa.gov.au
	Contact address for notification?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Contact address for Register entry?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

<b>Tenth party details</b> (Reg 7(3)(a) ILUA Regulations)	Name	Minister for Environment
	Contact Name	Click to enter text
	Postal Address	12 <sup>th</sup> Floor, Dumas House 2 Havelock Street, West Perth WA 6005
	Telephone number	Click to enter text
	Fax number (if available)	Click to enter text
	Email address (if available)	Click to enter text
	Is this party also the applicant?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>Representative's name, address and telephone number (if applicable)</b>	Company Name	State Solicitor's Office
	Contact Name	Sheila Begg
	Postal Address	David Malcolm Justice Centre, 28 Barrack Street, Perth WA 6000
	Telephone number	(08) 9264 1888
	Fax number (if available)	(08) 9264 1440
	Email address (if available)	s.begg@sso.wa.gov.au
	Contact address for notification?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Contact address for Register entry?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

<b>Eleventh party details</b> (Reg 7(3)(a) ILUA Regulations)	Name	Minister for Lands
	Contact Name	Click to enter text
	Postal Address	Department of Planning, Lands and Heritage, Gordon Stephenson House, Level 2, 140 William Street, Perth WA 6000
	Telephone number	Click to enter text
	Fax number (if available)	Click to enter text
	Email address (if available)	Click to enter text
	Is this party also the applicant?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>Representative's name, address and telephone number (if applicable)</b>	Company Name	State Solicitor's Office
	Contact Name	Sheila Begg
	Postal Address	David Malcolm Justice Centre, 28 Barrack Street, Perth WA 6000
	Telephone number	(08) 9264 1888
	Fax number (if available)	(08) 9264 1440
	Email address (if available)	s.begg@sso.wa.gov.au
	Contact address for notification?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Contact address for Register entry?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

<b>Twelfth party details</b> (Reg 7(3)(a) ILUA Regulations)	Name	Minister for Culture and the Arts
	Contact Name	Click to enter text
	Postal Address	Gordon Stephenson House, Level 2, 140 William Street, Perth WA 6000
	Telephone number	Click to enter text
	Fax number (if available)	Click to enter text
	Email address (if available)	Click to enter text
	Is this party also the applicant?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>Representative's name, address and telephone number (if applicable)</b>	Company Name	State Solicitor's Office
	Contact Name	Sheila Begg
	Postal Address	David Malcolm Justice Centre, 28 Barrack Street, Perth WA 6000
	Telephone number	(08) 9264 1888
	Fax number (if available)	(08) 9264 1440
	Email address (if available)	s.begg@sso.wa.gov.au
	Contact address for notification?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Contact address for Register entry?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

<b>Thirteenth party details</b> (Reg 7(3)(a) ILUA Regulations)	Name	Minister for Mines and Petroleum
	Contact Name	Click to enter text
	Postal Address	9 <sup>th</sup> Floor, Dumas House 2 Havelock Street, West Perth WA 6005
	Telephone number	Click to enter text
	Fax number (if available)	Click to enter text
	Email address (if available)	Click to enter text
	Is this party also the applicant?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>Representative's name, address and telephone number (if applicable)</b>	Company Name	State Solicitor's Office
	Contact Name	Sheila Begg
	Postal Address	David Malcolm Justice Centre, 28 Barrack Street, Perth WA 6000
	Telephone number	(08) 9264 1888
	Fax number (if available)	(08) 9264 1440
	Email address (if available)	s.begg@sso.wa.gov.au
	Contact address for notification?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Contact address for Register entry?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

<b>Fourteenth party details</b> (Reg 7(3)(a) ILUA Regulations)	Name	Minister for Regional Development
	Contact Name	Click to enter text
	Postal Address	11 <sup>th</sup> Floor, Dumas House 2 Havelock Street, West Perth WA 6005
	Telephone number	Click to enter text
	Fax number (if available)	Click to enter text
	Email address (if available)	Click to enter text
	Is this party also the applicant?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>Representative's name, address and telephone number (if applicable)</b>	Company Name	State Solicitor's Office
	Contact Name	Sheila Begg
	Postal Address	David Malcolm Justice Centre, 28 Barrack Street, Perth WA 6000
	Telephone number	(08) 9264 1888
	Fax number (if available)	(08) 9264 1440
	Email address (if available)	s.begg@sso.wa.gov.au
	Contact address for notification?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Contact address for Register entry?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	



<b>Fifteenth party details</b> (Reg 7(3)(a) ILUA Regulations)	Name	Minister for Tourism
	Contact Name	Click to enter text
	Postal Address	10 <sup>th</sup> Floor, Dumas House 2 Havelock Street, West Perth WA 6005
	Telephone number	Click to enter text
	Fax number (if available)	Click to enter text
	Email address (if available)	Click to enter text
	Is this party also the applicant?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>Representative's name, address and telephone number (if applicable)</b>	Company Name	State Solicitor's Office
	Contact Name	Sheila Begg
	Postal Address	David Malcolm Justice Centre, 28 Barrack Street, Perth WA 6000
	Telephone number	(08) 9264 1888
	Fax number (if available)	(08) 9264 1440
	Email address (if available)	s.begg@sso.wa.gov.au
	Contact address for notification?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Contact address for Register entry?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

<b>Sixteenth party details</b> (Reg 7(3)(a) ILUA Regulations)	Name	Minister for Water
	Contact Name	Click to enter text
	Postal Address	8 <sup>th</sup> Floor, Dumas House 2 Havelock Street, West Perth WA 6005
	Telephone number	Click to enter text
	Fax number (if available)	Click to enter text
	Email address (if available)	Click to enter text
	Is this party also the applicant?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>Representative's name, address and telephone number (if applicable)</b>	Company Name	State Solicitor's Office
	Contact Name	Sheila Begg
	Postal Address	David Malcolm Justice Centre, 28 Barrack Street, Perth WA 6000
	Telephone number	(08) 9264 1888
	Fax number (if available)	(08) 9264 1440
	Email address (if available)	s.begg@sso.wa.gov.au
	Contact address for notification?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Contact address for Register entry?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

<b>Seventeenth party details</b> (Reg 7(3)(a) ILUA Regulations)	Name	Conservation and Parks Commission
	Contact Name	Click to enter text
	Postal Address	17 Dick Perry Avenue, Technology Park, Western Precinct, Kensington WA
	Telephone number	Click to enter text
	Fax number (if available)	Click to enter text
	Email address (if available)	Click to enter text
	Is this party also the applicant?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>Representative's name, address and telephone number (if applicable)</b>	Company Name	State Solicitor's Office
	Contact Name	Sheila Begg
	Postal Address	David Malcolm Justice Centre, 28 Barrack Street, Perth WA 6000
	Telephone number	(08) 9264 1888
	Fax number (if available)	(08) 9264 1440
	Email address (if available)	s.begg@sso.wa.gov.au
	Contact address for notification?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Contact address for Register entry?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

<b>Eighteenth party details</b> (Reg 7(3)(a) ILUA Regulations)	Name	Chief Executive Officer of the Department of Biodiversity, Conservation and Attractions
	Contact Name	Click to enter text
	Postal Address	17 Dick Perry Avenue, Technology Park, Western Precinct, Kensington WA
	Telephone number	Click to enter text
	Fax number (if available)	Click to enter text
	Email address (if available)	Click to enter text
	Is this party also the applicant?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>Representative's name, address and telephone number (if applicable)</b>	Company Name	State Solicitor's Office
	Contact Name	Sheila Begg
	Postal Address	David Malcolm Justice Centre, 28 Barrack Street, Perth WA 6000
	Telephone number	(08) 9264 1888
	Fax number (if available)	(08) 9264 1440
	Email address (if available)	s.begg@sso.wa.gov.au
	Contact address for notification?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Contact address for Register entry?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

<b>Nineteenth party details</b> (Reg 7(3)(a) ILUA Regulations)	Name	Housing Authority
	Contact Name	Click to enter text
	Postal Address	99 Plain Street, East Perth WA
	Telephone number	Click to enter text
	Fax number (if available)	Click to enter text
	Email address (if available)	Click to enter text
	Is this party also the applicant?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>Representative's name, address and telephone number (if applicable)</b>	Company Name	State Solicitor's Office
	Contact Name	Sheila Begg
	Postal Address	David Malcolm Justice Centre, 28 Barrack Street, Perth WA 6000
	Telephone number	(08) 9264 1888
	Fax number (if available)	(08) 9264 1440
	Email address (if available)	s.begg@sso.wa.gov.au
	Contact address for notification?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Contact address for Register entry?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

<b>Twentieth party details</b> (Reg 7(3)(a) ILUA Regulations)	Name	The Aboriginal Affairs Planning Authority
	Contact Name	Click to enter text
	Postal Address	Department of Planning, Lands and Heritage, Gordon Stephenson House, Level 2, 140 William Street, Perth WA 6000
	Telephone number	Click to enter text
	Fax number (if available)	Click to enter text
	Email address (if available)	Click to enter text
	Is this party also the applicant?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>Representative's name, address and telephone number (if applicable)</b>	Company Name	State Solicitor's Office
	Contact Name	Sheila Begg
	Postal Address	David Malcolm Justice Centre, 28 Barrack Street, Perth WA 6000
	Telephone number	(08) 9264 1888
	Fax number (if available)	(08) 9264 1440
	Email address (if available)	s.begg@sso.wa.gov.au
	Contact address for notification?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Contact address for Register entry?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

<b>Twentyfirst party details</b> (Reg 7(3)(a) ILUA Regulations)	Name	Aboriginal Lands Trust
	Contact Name	Click to enter text
	Postal Address	Department of Planning, Lands and Heritage, Gordon Stephenson House, Level 2, 140 William Street, Perth WA 6000
	Telephone number	Click to enter text
	Fax number (if available)	Click to enter text
	Email address (if available)	Click to enter text
	Is this party also the applicant?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>Representative's name, address and telephone number (if applicable)</b>	Company Name	State Solicitor's Office
	Contact Name	Sheila Begg
	Postal Address	David Malcolm Justice Centre, 28 Barrack Street, Perth WA 6000
	Telephone number	(08) 9264 1888
	Fax number (if available)	(08) 9264 1440
	Email address (if available)	s.begg@sso.wa.gov.au
	Contact address for notification?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Contact address for Register entry?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

<b>Twentysecond party details</b> (Reg 7(3)(a) ILUA Regulations)	Name	Mid West Development Commission
	Contact Name	Click to enter text
	Postal Address	20 Gregory Street, Geraldton WA
	Telephone number	Click to enter text
	Fax number (if available)	Click to enter text
	Email address (if available)	Click to enter text
	Is this party also the applicant?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>Representative's name, address and telephone number (if applicable)</b>	Company Name	State Solicitor's Office
	Contact Name	Sheila Begg
	Postal Address	David Malcolm Justice Centre, 28 Barrack Street, Perth WA 6000
	Telephone number	(08) 9264 1888
	Fax number (if available)	(08) 9264 1440
	Email address (if available)	s.begg@sso.wa.gov.au
	Contact address for notification?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Contact address for Register entry?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	



<b>Twentythird party details</b> (Reg 7(3)(a) ILUA Regulations)	Name	Western Australian Museum
	Contact Name	Click to enter text
	Postal Address	49 Kew Street, Welshpool WA
	Telephone number	Click to enter text
	Fax number (if available)	Click to enter text
	Email address (if available)	Click to enter text
	Is this party also the applicant?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>Representative's name, address and telephone number (if applicable)</b>	Company Name	State Solicitor's Office
	Contact Name	Sheila Begg
	Postal Address	David Malcolm Justice Centre, 28 Barrack Street, Perth WA 6000
	Telephone number	(08) 9264 1888
	Fax number (if available)	(08) 9264 1440
	Email address (if available)	s.begg@sso.wa.gov.au
	Contact address for notification?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Contact address for Register entry?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

<b>Twentyfourth party details</b> (Reg 7(3)(a) ILUA Regulations)	Name	Western Australian Land Authority (DevelopmentWA)
	Contact Name	Click to enter text
	Postal Address	Level 6, 40 The Esplanade, Perth WA 6000
	Telephone number	Click to enter text
	Fax number (if available)	Click to enter text
	Email address (if available)	Click to enter text
	Is this party also the applicant?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>Representative's name, address and telephone number (if applicable)</b>	Company Name	State Solicitor's Office
	Contact Name	Sheila Begg
	Postal Address	David Malcolm Justice Centre, 28 Barrack Street, Perth WA 6000
	Telephone number	(08) 9264 1888
	Fax number (if available)	(08) 9264 1440
	Email address (if available)	s.begg@sso.wa.gov.au
	Contact address for notification?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Contact address for Register entry?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

## Part C—Mandatory parties

<p><b>5. Native title group – registered native title claimant or registered native title body corporate (RNTBC)</b> (s 24CD(1) and (2)(a)–(b) NTA)</p>	<p>Is there one or more:</p> <ul style="list-style-type: none"> <li>• registered native title claimant(s) or</li> <li>• RNTBCs</li> </ul> <p>for <b>any</b> of the land or waters in the agreement area?</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <hr/> <p>If yes, are <b>all</b> such registered native title claimants and/or <b>all</b> RNTBCs parties to the agreement?</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If yes please identify which party/parties:</p> <p><b>The Southern Yamatji Claim Group</b>  <b>The Mullewa Wadjari Claim Group</b>  <b>The Hutt River Claim Group</b>  <b>The Widi Mob Claim Group</b></p>
<p><b>6. Native title group – no registered native title claimant or RNTBC</b> (s 24CD(1), (2)(c) and (3) NTA)</p>	<p>If there is no registered native title claimant or RNTBC for <b>all or any part</b> of the agreement area, one or more of the following persons/bodies must be party to the agreement (there must be at least one):</p> <p>A person(s) who claims to hold native title in relation to an area?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>A RATSIB/NTSP for the area?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, please identify which party/parties:</p> <p>Click to enter text</p>

<p><b>7. Government parties</b> (ss 24CD(5), 24EBA(1)(a)(i) and (ii), (b) and (c), 24EBA(2)– (4) NTA and Reg 7(3)(c) ILUA Regulations)</p>	<p>Does the agreement make provision for the extinguishment of native title rights and interests by surrendering them to the Commonwealth or a State or Territory government (relevant government)?</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>Does the agreement validate the purported past extinguishment of native title rights and interests by surrender to the relevant government?</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If the answer to either of the above questions is yes, is the relevant government party to the agreement?</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, please identify which party/parties:</p> <p><b>State of Western Australia.</b></p>
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## Part D—Other parties

<p><b>8. Other native title parties</b> (s 24CD(4)(a) and (b) NTA)</p>	<p>Please identify any other party/parties who claims to hold native title in relation to the area who has not previously been identified in questions 5 or 6.</p> <p>Click to enter text</p>
<p><b>9. RATSIBs or NTSPs for the area</b> (s 24CD(7) NTA and Reg 7(3)(b) and (4) ILUA Regulations)</p>	<p>Are there any RATSIBs/NTSPs for <b>any</b> of the area covered by the agreement not previously identified in question 6?</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, are any RATSIBs/NTSPs for any of the area a <b>party</b> to the agreement?</p> <p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If yes, please identify which RATSIB/NTSP:</p> <p>Click to enter text</p>
<p><b>10. Government parties</b> (Reg 7(3)(c) ILUA Regulations)</p>	<p>If not previously identified in question 7, is the Commonwealth, State or Territory government a party to the agreement?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, please identify which party/parties:</p> <p>Click to enter text</p>

## *Part E—Informing RATSIBs/NTSPs of intention to enter agreement*

<p><b>11. Informing RATSIBs or NTSPs of intention to enter agreement</b> (s 24CD(7) NTA and Reg 7(4) ILUA Regulations)</p>	<p>If there is one or more RATSIBs/NTSPs for any of the agreement area and none are parties to the agreement, has a person in the native title group informed at least one of those bodies of the groups' intention to enter into the agreement?</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, please specify which RATSIBs/NTSPs have been informed, how and when they were notified and by whom:</p> <p><b>[Further details to be inserted prior to lodgement]</b></p>
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## Part F—Agreement area

<p><b>12. Complete description of agreement area</b> (s 24CG(2) NTA and Reg 7(2)(d) and 5 ILUA Regulations)</p>	<p>Provide a 'complete description' of the agreement area, including any areas within the external boundary of the agreement area that are excluded from the agreement area (or refer to relevant section of agreement):</p> <p><b>See description of 'Agreement Area' in Item 1, Schedule 1 of the Agreement.</b></p> <p><b>Note:</b> a map of the agreement area showing geographic coordinates must be attached to this application or be contained within the agreement.</p>
<p><b>13. Complete description of surrender area</b> (s 24CG(2) NTA and Reg 7(2)(e) and 5 ILUA Regulations)</p>	<p>Does the agreement provide for the surrender of native title that is intended to extinguish native title rights and interests in the agreement area?</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, please provide a 'complete description' of those areas (or refer to relevant section of agreement):</p> <p><b>See description of 'Surrender Area' in Item 1, Schedule 1 of the Agreement.</b></p> <p><b>Note:</b> a map showing geographic coordinates which identifies any areas where the surrender of native title is intended to extinguish native title rights and interests must be attached to this application or be contained within the agreement.</p>

## Part G—Operating period

<p><b>14. Operating period</b> (Reg 7(3)(d) ILUA Regulations)</p>	<p>Does the agreement specify a time period during which it will operate?</p> <p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If applicable, please provide the commencement date here (the commencement date may also be defined by reference to a specified event or activity, e.g. once a determination of native title is made by the Federal Court):</p> <p><b>The Agreement commences on the date of execution of the Agreement, subject to clauses 5.2(b) to 5.2(j) of the Agreement.</b></p> <p>If applicable, please write the end date here (the end date may also be defined by reference to a specified event or activity, e.g. upon completion of a particular project):</p> <p><b>The Agreement will terminate on the occurrence of the events described in clause 5.4(a) of the Agreement, whichever is the first to occur. Subject to this, the Agreement continues indefinitely.</b></p> <p>Please specify where in the agreement details of the operating period are located:</p> <p><b>Clauses 1.2, 5.2, 5.3, 5.4, 5.7 and 5.8.</b></p>
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## Part H—Statements in the agreement

<p><b>15. Consent to future acts</b> (s 24EB(1)(b) NTA and Reg 7(5)(a) ILUA Regulations)</p>	<p>Does the agreement contain any statement/s consenting to the doing of a particular future act, or class of acts, whether or not subject to conditions?</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, please specify where each such statement is located in the agreement (e.g. clause 5 and 6 plus definitions):</p> <p><b>Clauses 1.2 and 7.2.</b></p>
<p><b>16. Acts excluded from the right to negotiate</b> (s 24EB(1)(c) NTA and Reg 7(5)(b) ILUA Regulations)</p>	<p>Does the agreement include any statement/s to the effect that the right to negotiate provisions of the NTA (Part 2, Division 3, Subdivision P of the NTA) are not intended to apply to any or all of the future acts included in the agreement?</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, please specify where each such statement is located in the agreement:</p> <p><b>Clauses 1.2 and 7.3.</b></p>
<p><b>17. Surrender intended to extinguish native title</b> (s 24EB(1)(d) NTA and Reg 7(5)(c) ILUA Regulations)</p>	<p>Does the agreement provide for the surrender of native title rights and interests in the future?</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, does the agreement contain a statement to the effect that the surrender is intended to extinguish native title rights and interests?</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, please specify where each such statement is located in the agreement (please also ensure that question 7 has also been completed):</p> <p><b>Clauses 1.2 and 7.2.</b></p>

<p><b>18. Validation of future acts that have already been done invalidly</b> (s 24EBA(1)(a)(i)–(ii) NTA and Reg 7(5)(d)–(e) ILUA Regulations)</p>	<p>Does the agreement provide for the validation of future acts or class of future acts (other than intermediate period acts or the surrender of native title) that have already been done invalidly, whether or not subject to conditions?</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, please specify where each such statement is located in the agreement:</p> <p><b>Clause 1.2 and 7.1.</b></p>
<p><b>19. Intermediate period acts affected</b> (s 24EBA(1)(a) (iii) NTA and Reg 7(5)(f) ILUA Regulations)</p>	<p>Does the agreement provide for changing the effects on native title of the validation of an intermediate period act or class of acts?</p> <p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If yes, please specify where each such statement is located in the agreement:</p> <p>Click to enter text</p>
<p><b>20. Validation of the previous purported surrender of native title</b> (s 24EBA(1)–(4) NTA and Reg 7(5)(g) ILUA Regulations)</p>	<p>Does the agreement provide for the validation of the extinguishment of native title rights and interests by surrender which has already occurred invalidly?</p> <p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If yes, does the agreement contain a statement to the effect that the surrender is intended to have extinguished those native title rights and interests?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, please specify where each such statement is located in the agreement (please ensure that question 7 has also been completed):</p> <p>Click to enter text</p>

<p><b>21. Any other comments about required statements in the agreement?</b></p>	<p>N/A <input checked="" type="checkbox"/> Yes <input type="checkbox"/></p> <p>Click to enter text</p>
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### *Part I—Parts of the Register to be kept confidential*

<p><b>22. Confidential information</b> (s 199E(1)-(2) NTA)</p>	<p>Please indicate if there is any information or documents which you do not wish to be available for inspection by the public if the agreement is registered:</p> <p><b>[To be inserted prior to lodgement]</b></p> <p><b>Note:</b> the Registrar can only keep information confidential to the extent that the law allows.</p>
	<p>Is the agreement between the parties confidential?</p> <p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>

## Part J—Document checklist **[To be completed prior to lodgement]**

<b>Documents that must accompany the application</b> (s 24CG(2) NTA, Reg 7(2) ILUA Regulations and Reg 9(1) PBC Regulations)	A copy of the agreement (the original is not required) including any attachments or appendices—s 24CG(2).	Yes <input type="checkbox"/>
	A copy of each determination of native title for each party that is a RNTBC—Reg 7(2)(a).	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
	A statement by each party to the agreement, signed by or for the party, that the party agrees to the application being made—Reg 7(2)(b).	Yes <input type="checkbox"/>  Specify where in agreement/application:  Click to enter text
	An extract from the Register of Native Title Claims giving details of each party that is a registered claimant—Reg 7(2)(c).	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
	A complete description of the agreement area (Reg 7(2)(d) and (5)) including: <ul style="list-style-type: none"> <li>• any areas within the external boundary of the agreement area that are not included in the agreement area, and</li> <li>• a map showing geographic coordinates of that area.</li> </ul>	Yes <input type="checkbox"/>  Specify where in agreement/application:  Click to enter text

	<p>If applicable:</p> <ul style="list-style-type: none"> <li>• a complete description of any areas where the surrender of native title is intended to extinguish native title rights and interests in the agreement area and any areas not included, and</li> <li>• a map showing geographic coordinates of that area— Regs 7(2)(e) and (5).</li> </ul>	<p>Yes <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Specify where in agreement/application:</p> <p>Click to enter text</p>
	<p>If the application is certified, a copy of the certification— s 24CG(3)(a).</p>	<p>Yes <input type="checkbox"/> N/A <input type="checkbox"/></p>
	<p>If the application is not certified, a statement setting out how the requirements for identification and authorisation have been met—s 24CG(3)(b).</p>	<p>Yes <input type="checkbox"/> N/A <input type="checkbox"/></p>
	<p>If:</p> <ul style="list-style-type: none"> <li>• a RNTBC is party to the agreement, and</li> <li>• the agreement gives effect to a 'native title decision', and</li> <li>• for any part of the agreement area there is one or more RATSIBs or NTSPs, and</li> <li>• none of them is party (or there is no RATSIB/ NTSP for the agreement area)— a document as mentioned in Reg 9(1) of the PBC Regulations (see Reg 7(2)(g) ILUA Regulations).</li> </ul>	<p>Yes <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>See possible format for such a document at Attachment A below</p>

	<p>If there is a RATSIB/NTSP for the agreement area and it is not a party, a statement signed by a party that is a member of the native title group (see s 24CD(1)–(3)) that at least one RATSIB/NTSP was informed of the native title group’s intention to enter into the agreement— Reg 7(4).</p>	<p>Yes <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Specify where in agreement/application:</p> <p>Click to enter text</p>
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