



Australian Government
National Offshore Petroleum
Titles Administrator

FORM 6

MULTIPLE TITLEHOLDERS—NOMINATION OF SINGLE REGISTERED HOLDER TO TAKE ELIGIBLE VOLUNTARY ACTION

JOINT WRITTEN NOTICE
IN ACCORDANCE WITH SUBSECTION 775B(2) OF THE OFFSHORE PETROLEUM AND GREENHOUSE GAS STORAGE ACT 2006

MULTIPLE TITLEHOLDERS TO GIVE NOMINATION TO NOPTA PRIOR TO TAKING ELIGIBLE VOLUNTARY ACTION

To	Titles Manager—National Offshore Petroleum Titles Administrator Resources Division Department of Industry			
	Post	Perth - GPO Box 7871, 6850	Phone	08 6424 5317
E-mail	titles@nopta.gov.au	Office Hours	8:00 – 17:00 Mon – Fri	
	www.nopta.gov.au			
ABN: 74 599 608 295				

JOINT WRITTEN NOTICE

Pursuant to subsection 775B(2) of the *Offshore Petroleum and Greenhouse Gas Storage Act 2006*, the registered holders of [Title Number], [List names of registered holders] by this notice NOMINATE [Name of nominee titleholder] as the person who is authorised to take eligible voluntary actions on behalf of the registered holders.

TITLE NUMBER	
	NOMINEE'S CONTACT DETAILS
Nominee Titleholder's Name	
Business Address (if Individual) Head Office or a Principal Office Address (if body corporate)	
ACN	
Nominee's Phone	
Nominee's Fax (if any)	
Nominee's Email	
OPTIONAL:	
Contact Person	
Position Held	
Contact Phone	
Contact Email	
<i>Where the registered holder is an individual:</i>	
SIGNED	DATE
<input type="text"/>	<input type="text"/>

*** Before completing this form, please refer to the notes section on page 3 ***

WHERE A REGISTERED HOLDER IS A COMPANY

If the registered holder is a company then use the following Signature Block. A company must have two of its directors sign below. Alternatively if there is only one Director, then it needs to be signed by the Director and the Company Secretary. If there is only one Director, who is also the Company Secretary, then only that person needs to sign.

EXECUTED BY
[insert Company Name]

Signature

Signature

Date

Date

Full name (please print)

Full name (please print)

Position (Director or Secretary)

DIRECTOR

Where only one person signs above then that person warrants that they are the sole Director and Secretary of the company.

In the Presence of:

In the Presence of:

WITNESS

WITNESS

Please print full name and occupation or profession of witnesses above.

NOTES

TITLEHOLDERS PLEASE NOTE:

1. THIS FORM IS TO BE EXECUTED JOINTLY BY ALL TITLEHOLDERS.
2. A SEPARATE FORM IS REQUIRED FOR EACH TITLE.
3. THE GIVING OF THIS NOTICE IS OPTIONAL