# Suspension or suspension and extension—greenhouse gas assessment permit

Under Section 436 or 439A (as applicable) of the *Offshore Petroleum and Greenhouse Gas Storage Act 2006* (the OPGGS Act)*.*

In making an application please refer to [NOPTA Forms Guidance – Greenhouse Gas](https://www.nopta.gov.au/forms/nopta-forms/nopta-forms-guidance/NOPTA-Forms-Guidance-Greenhouse-Gas.pdf" \o "Link to the NOPTA Forms Guidance for greenhouse gas applications on NOPTA's website.).

For information about how NOPTA collects, uses and discloses personal information, please refer to our [https://www.nopta.gov.au/privacy.html](https://aus01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.nopta.gov.au%2Fprivacy.html&data=04%7C01%7Cdawn.belcher%40nopta.gov.au%7Caf86015851af4aa4dec708d9e6da3fee%7C2940859fee864ee3848f02ac9eba62b2%7C0%7C0%7C637794647314380519%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000&sdata=L0dq4g0EhLE9v95kfkgDmbd1rwwf%2Fg4rsHFS56DeU7s%3D&reserved=0)

## Title and titleholder details

| Title number (A separate application is required for each title) | Click here to enter text. |
| --- | --- |
| Type of application | Choose an item. |

**Note:** To apply for a suspension or suspension and extension in conjunction with a variation, please use the Variation, Suspension and Extension application form.

| Titleholder(s) (Company or individual name(s)) | ASIC ACN/ARBN: (if applicable) |
| --- | --- |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
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| Click here to enter text. | Click here to enter text. |

## Eligible voluntary action (EVA)

| Application made under a valid EVA Nomination (under subsection 775C(2) of the OPGGS Act) | Choose an item. |
| --- | --- |

**Note:** All titleholders must sign the application form if not made under a valid Nomination (Form 6).

## Application fee

| Application fee paid (section 695L of the OPGGS Act) | Choose an item. |
| --- | --- |

**Note:** Please provide proof of payment.

## Details of the proposed suspension or suspension and extension of work program commitment (condition) sought

The titleholder(s) should outline only the permit year(s) to which the proposed suspension or suspension and extension applies and any effect on any subsequent years.

Additional rows may be added for multiple activities within a permit year(s).

| Year | Start date | End date | Activity quantity and unit | Activity description | Indicative value A$ |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  | Click here to enter text. |  |
|  |  |  |  | Click here to enter text. |  |
|  |  |  |  | Click here to enter text. |  |
|  |  |  |  | Click here to enter text. |  |
|  |  |  |  | Click here to enter text. |  |
|  |  |  |  | Click here to enter text. |  |
|  |  |  |  | Click here to enter text. |  |
|  |  |  |  | Click here to enter text. |  |

| Length of suspension | Click here to enter text. |
| --- | --- |
| Length of extension (if applicable) | Click here to enter text. |

## Applicant contact details

| Company name | Click here to enter text. |
| --- | --- |
| Primary contact name | Click here to enter text. |
| Position held | Click here to enter text. |
| Phone | Click here to enter text. |
| Email | Click here to enter text. |

## Signatures

***Note:*** *If multiple applicants are signing, please attach additional pages.*

1. **I am/ We are signing this form as either: \* #**

The Directors/Director and Secretary of an Australian registered company applicant.

The Attorney appointed under a Power of Attorney of an Australian registered company applicant.

The person/s authorised to sign to legally bind a Foreign registered company applicant (including foreign companies registered with ASIC). ∞

The Attorney appointed under a Power of Attorney of a Foreign registered company applicant. ∞

\* *Mark the applicable box.*

**#***If an applicant is a Government entity they should contact NOPTA prior to signing to discuss requirements*

*∞ See the* [*NOPTA signature fact sheet*](https://www.nopta.gov.au/_documents/fact-sheets/fact-sheet-signatures-execution-of-NOPTA-forms-by-companies.pdf) *for information on required evidence of signing authority/powers of attorney for foreign registered companies.*

1. **I / We confirm that the information provided in this form is true and correct.** *Please note that giving false or misleading information is an offence under Part 7.4 of the Criminal Code Act 1995 (see in particular sections 136.1 and 137.1 of the Criminal Code).*

### A. If the applicant is an Australian registered company (copy for multiple applicants)

|  |
| --- |
| **Executed by (insert full name of company including the ACN)** |
|  |

*As a Director/ Sole Director/ Secretary, in accordance with section 127 of the Corporations Act 2001 (Cth), by:*

|  |  |
| --- | --- |
| *Signature* | *Signature* |
| *Full name (block letters)* | *Full name (block letters)* |
| *Office held (Director/Sole Director)* | *Office held (Director/Secretary) \** |
| *Date* | *Date* |

\* Record the applicable position held by the signatory. Section 127 of the *Corporations Act 2001* provides that a company may validly execute a document with or without a common seal if the document is signed by: (i) two directors of the company; (ii) a director and the secretary of the company; or (iii) where the company is a proprietary company and has a sole director who is also the sole company secretary, that director.

***OR*** *As the holder of a Power of Attorney for an Australian Registered Company*

I declare that I have a Power of Attorney authorising me to execute this Application on behalf of the Company named above, which has not been revoked as at the date of this Application.\*

|  |  |
| --- | --- |
| *Signed at (location):* | |
| *Signature of holder of Power of Attorney* | *Signed in the presence of: signature of Witness* |
| *Full name of Attorney (block letters)* | *Full name of Witness (block letters)* |
| *Position* |  |
| *Date* | *Date* |

|  |  |
| --- | --- |
| **Has a copy of the Power of Attorney document previously been provided to NOPTA? \*** | Choose an item. |
| **Date of Power of Attorney** | Click here to enter a date. |

\* A person signing as attorney for an Australian registered company must provide NOPTA with a copy of the Power of Attorney document for our records.

### OR B. If the applicant is a Foreign registered company (copy for multiple applicants)

|  |
| --- |
| **EXECUTED BY** |
| Full name of company: |
| Country of registration: |
| Registration number in country of registration: |
| Australian Registered Body Number (ARBN): |

*As person/s who can legally bind the Foreign Company, in accordance with the laws of the company’s country of incorporation, by:*

|  |  |
| --- | --- |
| *Signature* | *Signature* |
| *Full name (block letters)* | *Full name (block letters)* |
| *Office held (Director/Other) \** | *Office held (Director/Secretary/Other) \** |
| *Date* | *Date* |
| (If required) Signed in the presence of: *Signature of Witness* | (If required) Signed in the presence of: *Signature of Witness* |
| *Full name and address of Witness (block letters)* | *Full name and address of Witness (block letters)* |

\* *See the* [*NOPTA signature fact sheet*](https://www.nopta.gov.au/_documents/fact-sheets/fact-sheet-signatures-execution-of-NOPTA-forms-by-companies.pdf) *for information on the evidence required to be provided to NOPTA of the signing authority for foreign registered companies.*

***OR*** *As the holder of a Power of Attorney for a Foreign Registered Company*

I declare that I have a Power of Attorney authorising me to execute this Application on behalf of the Foreign registered Company named above, which has not been revoked as at the date of this Application.\**∞*

|  |  |
| --- | --- |
| *Signed at (location):* | |
| *Signature of holder of Power of Attorney* | *Signed in the presence of: signature of Witness* |
| *Full name of Attorney (block letters)* | *Full name of Witness (block letters)* |
| *Position* |  |
| *Date* | *Date* |

|  |  |
| --- | --- |
| **Has a copy of the Power of Attorney document previously been provided to NOPTA? \*** | Choose an item. |
| **Date of Power of Attorney** | Click here to enter a date. |

\*A person signing as attorney for a foreign registered company must provide NOPTA with a copy of the Power of Attorney document for our records.

*∞ See the* [*NOPTA signature fact sheet*](https://www.nopta.gov.au/_documents/fact-sheets/fact-sheet-signatures-execution-of-NOPTA-forms-by-companies.pdf) *for information on required form/additional information to be provided for powers of attorney for foreign registered companies.*