



Government of **Western Australia**
Department of **Water and Environmental Regulation**

Annual Audit Compliance Report Form

Environmental Protection Act 1986, Part V Division 3

Once completed, please submit this form either via email to info@dwer.wa.gov.au, or to the below postal address:

Department of Water and Environmental Regulation
Locked Bag 10
Joondalup DC WA 6919

Section A – Licence details			
Licence number:	L8767/2013/1	Licence file number:	2013/002942.
Licence holder name:	Shire of Plantagenet		
Trading as:	Shire of Plantagenet		
ACN:			
Registered business address:	Lot 1 on Diagram 833667 Lake Matilda Road Kendenup WA 6323		
Reporting period:	01 / 03 / 2024 to 28 / 02 / 2025		

Section B – Statement of compliance with licence conditions
Did you comply with all of your licence conditions during the reporting period? (please tick the appropriate box)
<input checked="" type="checkbox"/> Yes – please complete: <ul style="list-style-type: none"> • section C; • section D (if required); and • sign the declaration in Section F.
<input type="checkbox"/> No – please complete: <ul style="list-style-type: none"> • section C; • section D (if required); • section E; and • sign the declaration in Section F.

Section C – Statement of actual production	
Provide the actual production quantity for this reporting period. Supporting documentation is to be attached.	
Prescribed premises category	Actual production quantity
62	1,444.80 tonnes

Section D – Statement of actual Part 2 waste discharge quantity	
Provide the actual Part 2 waste discharge quantity for this reporting period. Supporting documentation is to be attached.	
Prescribed premises category	Actual Part 2 waste discharge quantity
N/A	N/A

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Section E – Details of non-compliance with licence condition			
Please use a separate page for each condition with which the licence holder was non-compliant at a time during the reporting period.			
Condition no:		Date(s) of non-compliance:	
Details of non-compliance:			
N/A			
What was the actual (or suspected) environmental impact of the non-compliance?			
NOTE – please attach maps or diagrams to provide insight into the precise location of where the non-compliance took place.			
Cause (or suspected cause) of non-compliance:			
Action taken to mitigate any adverse effects of non-compliance and prevent recurrence of the non-compliance:			
Was this non-compliance previously reported to DWER?			
<input type="checkbox"/> Yes, and			
<input type="checkbox"/> Reported to DWER verbally		Date: / /	
<input type="checkbox"/> Reported to DWER in writing		Date: / /	

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Section F – Declaration

I / We declare that the information in this Annual Audit Compliance Report is true and correct and is not false or misleading in a material particular¹.

I / We consent to the Annual Audit Compliance Report being published on the Department of Water and Environmental Regulation's (DWER) website.

Signature ² :		Signature:	
Name: (printed)		Name: (printed)	
Position:		Position:	
Date:	29/03/2025	Date:	
Seal (if signing under seal):			