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| APPLICATION FOR AUTHORISATION UNDER SECTIONS 21, 23 and 29 OF THE *ABORIGINAL HERITAGE ACT 1988* |

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| SECTION 1: AUTHORISATION SOUGHT | | |
| Excavate land for the purpose of uncovering any Aboriginal site, object or remains  Section 21 without a Local Heritage Agreement; or  Section 21 with an executed Local Heritage Agreement | Damage, disturb or interfere with any Aboriginal site, object or remains  Section 23 without a Local Heritage Agreement; or  Section 23 and Approval of an executed Local Heritage Agreement under section 19I | Sell or dispose of an Aboriginal object  Section 29(1)(a)  Remove an Aboriginal object from the State    Section 29(1)(b) |

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| Section 2: APPLICANT DETAILS  The applicant is the individual or organisation to whom the authorisation will be granted. | |
| Name |  |
| Organisation |  |
| ABN |  |
| Address |  |
|  | Who will this authorisation apply to?  Applicant  Applicant and Applicant’s agents, staff, contractors, sub-contractors  Applicant and others (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Is the authorisation required to apply to this project for:  Future repairs and maintenance  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| Section 3: ABORIGINAL PARTY TO THE LOCAL HERITAGE AGREEMENT | |
| Name |  |
| Organisation |  |
| Postal Address |  |

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| Section 4: CONTACT PERSON DETAILS | | | |
| Name |  | | |
| Position |  | | |
| Organisation |  | | |
| Postal address |  | | |
| Phone |  | Mobile |  |
| Email |  | Fax |  |

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| Section 5: AUTHORISATION AREA | |
| Please identify and describe the area of land over which an authorisation is sought:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Address |  |
| Certificate of Title (crown lease or licence reference); and/or  Exploration authority or mining lease number (if applicable) |  |
| Does this application cover the whole or only part of the above-listed parcel of land or lease area?  Whole  Part only (provide details)  Please attach a site map clearly outlining the area over which the authorisation is sought. This map should include grid references. This map should indicate not only the main work areas but all areas where ground disturbing works will, or are likely to, occur as part of the project.  Attached  Please describe the current land use:  Developed area  Vegetation  Other, please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| What is the applicant’s association with the land in the proposed authorisation area? (E.g. owner, lessee, agent)  Owner  Lessee  Agent  Other  Please provide information of all landowners:  Landowner’s name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Telephone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Postal Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Letter attached advising of landowner consent to undertake the proposed activities on the land | |

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| Section 6: PROJECT DESCRIPTION |
| You are required to attach a detailed project description including scope, scale and methodology.  Project description attached  Does the project involve any of the following activities?  Ground disturbing activities  Removal of Aboriginal objects from South Australia  Excavation of Aboriginal sites, objects or remains  Soil / spoil relocation from the Application Area  Soil disposal  Site salvage and removal from the Application Area  Non-destructive analysis of Aboriginal remains and objects  Destructive analysis of Aboriginal remains and objects (such as dating)  Samples to be taken of remains or objects for other testing  Reburial of remains  Storage and repatriation of objects and remains.  Approvals etc.:  Please attach full details of any planning approvals, allotments or new division numbers that may be issued as part of a development.  Attached  Not applicable  Timeframes  Specify the project timeframes (*insert*) |

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| **Section 7: SALE OR DISPOSAL OF OBJECTS** | |
| Do you intend to sell, barter, offer to sell or exchange an Object? | Yes  No |
| Is there an agreement to sell the Object? | Yes  No |
| If the Object has a buyer, what is the final sale price? | ***Insert amount in $AU*** |
| What is the method of sale? (Note: sale includes barter, exchange and offer to sell) | Private sale  Auction House  eBay/Gumtree/Online  Other |
| Will be the Object be removed from South Australia as part of facilitating the sale? (complete section 8 below) | Yes  No |
| Method of transportation out of South Australia | Australia Post  Courier  Road  Air Other: |

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| **Section 8: REMOVE AN ABORIGINAL OBJECT FROM SOUTH AUSTRALIA** | | | |
| |  |  | | --- | --- | | Will be the Aboriginal Object be removed from South Australia? | Yes  No | | Where will the Aboriginal Object be relocated to? | WA  NSW  Tas  Vic  NT  Qld  ACT  Other Territories  International |   Purpose of removal of Aboriginal Object from South Australia? | | | |
| A. Repatriation | B. Public/Private Exhibition | C. Dating, Scientific Testing or Analysis | D.  Other (specify): |
| ***Insert details:*** | | | |

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| 1. **Repatriation** | |
| Describe repatriation arrangements/plans | Attached |
| Identify the date of removal of the Aboriginal Objects from South Australia | ***Insert date*** |

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| 1. **Public and Private Exhibition** | |
| Identify the date of removal of Objects from South Australia | ***Insert date*** |
| Identify the date of return of Objects to South Australia | ***Insert date*** |
| Attached details of the intended exhibition, including agreements reached with other institutions, museums etc. | Attached |
| Describe the nature and type of each Aboriginal Object included in the exhibition, including all known provenance information for each Object | Attached |

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| 1. **Dating, Scientific Testing or Analysis** | | | | |
| Non-destructive | Destructive | |  |  |
| Identify the date of removal of Objects from South Australia (if known) | | ***Insert date*** | | |
| Identify the date of return of Objects to South Australia (if known) | | ***Insert date*** | | |
| Provide the name and address of the organisation conducting the testing or analysis | | ***Insert details*** | | |
| Describe techniques intended to be utilised. Attach details of method of sampling and analysis. | | Attached | | |

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| |  | | --- | | Section 9: EXCAVATION DETAILS | | | | | | | | | | | | | |
| You are required to attach a detailed excavation project description including scope, scale and intended methodology.  Project Description Attached | | | | | | | | | | | | |
| PROJECT DIRECTOR/  EXCAVATION SUPERVISOR | | | | Name | | | *Insert* | | | | | |
| Qualifications | | | *Insert* | | | | | |
| Attach details of the project director’s qualifications and excavation experience (note: all excavations must be supervised by a qualified archaeologist).  Qualifications and excavation experience attached | | | | | | | | | | | | |
| OTHER PROFESSIONALS INVOLVED IN EXCAVATION (INCLUDE ACADEMIC SUPERVISOR) | | | | | | | | | | | | |
| Name | *Insert* | | | | Qualifications | | | | *Insert* | | Role | *Insert* |
| Name | *Insert* | | | | Qualifications | | | | *Insert* | | Role | *Insert* |
| ROLE OF TRADITIONAL OWNERS /  ABORIGINAL ORGANISATIONS IN EXCAVATION | | | | | | | | Provide details: | | | | |
| PERIOD OF EXCAVATION | | | Start | | | | | *Insert date* (if known) | | Finish | | *Insert date (if known)* |
| POST-EXCAVATION | | Site rehabilitation methods | | | | Attached | | | | | | |
| Reports/publications | | | | Attached | | | | | | |
| Attach detailed site rehabilitation plan | | | | | | Attached | | | | | | |

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| Section 10: ETHICS |
| Is ethics approval for your project activities required?  No  Yes  If you ticked Yes above, please provide evidence of ethics approval  Evidence of approval attached |

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| Section 11: ABORIGINAL CONSULTATION |
| Aboriginal Stakeholders  Aboriginal cultural heritage surveys involve the physical inspection of a designated area to determine the presence of Aboriginal sites, objects and/or remains. Aboriginal cultural heritage reports should consider the risk of the proponent encountering sub-surface sites, objects and remains during ground disturbing works and would normally also include recommendations regarding the management and avoidance of Aboriginal sites, objects and remains located within the proposed project area.  Has the Applicant undertaken any Aboriginal heritage surveys in the Application Area?  Yes  No  if Yes, please attach the cultural heritage survey report  **Have you reached any agreements with any Traditional Owners, Aboriginal parties or Recognised Aboriginal Representative Bodies (RARBs) in relation to the proposed activities associated your project?**  Local Heritage Agreement  Other Agreement  **If there is no formalised agreement in place, have you held consultations with relevant Traditional Owners / Aboriginal Organisations for the project area? Please indicate:**  Organisation / Community (Specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Contact Person (Specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Via email  Via telephone |

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| Section 12: OTHER DOCUMENTS RELATING TO THE APPLICATION AREA |
| In addition to any survey reports, please attach any other reports or plans relevant to the Application Area:  Cultural heritage management plan attached  Discovery protocols attached  Historical, archaeological or anthropological reports attached  Other, please describe\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **Section 13: CHECK YOUR ATTACHMENTS**  *Your application will not be considered until all relevant attachments are supplied* |
| A site map with the proposed authorisation area clearly outlined  Copy of any Aboriginal heritage survey reports relating to the application area (where applicable)  Evidence of landholder consent to access the application area (where applicable)  Evidence of land holder consent to seek an authorisation under the Act (where applicable)  Evidence of Aboriginal organisation consultation  Local Heritage Agreement (Agreement with a RARB under section 19I)  Other supporting documents |

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| **Section 14: SIGNATURE** | |
| Applicant’s signature: |  |
| Print Name: |  |
| Date: |  |

**PLEASE SEND COMPLETED APPLICATIONS TO:**

Manager Aboriginal Heritage

Department of the Premier and Cabinet

Aboriginal Affairs and Reconciliation

GPO Box 320, ADELAIDE SA 5001 **Email:** [DPC-AAR.Heritage@sa.gov.au](mailto:DPC-AAR.Heritage@sa.gov.au)