



Application for Trade of Water Allocation

FORM A1
2023/24

(Temporary)

CENTRAL IRRIGATION TRUST
Ph: 8580 7100 Fax: 8588 2001
Email: trades@cit.org.au

Trading between CIT account's

No Fee

Total Trade Price \$ _____ Allocation Volume to be Traded (ML)

Seller

Full Name (as on Account) _____ Account No. _____

Postal Address _____

Telephone (Business hours) _____ Mobile _____

Email Address _____

Authorised by: *(all registered owners to sign)*

Print Name: _____ Signature: _____ Date: ___ / ___ / 20__

Print Name: _____ Signature: _____ Date: ___ / ___ / 20__

Print Name: _____ Signature: _____ Date: ___ / ___ / 20__

Purchaser

Full Name (as on Account) _____ Account No. _____

Postal Address _____

Telephone (Business hours) _____ Mobile _____

Email Address _____

Authorised by: *(all registered owners to sign)*

Print Name: _____ Signature: _____ Date: ___ / ___ / 20__

Print Name: _____ Signature: _____ Date: ___ / ___ / 20__

Print Name: _____ Signature: _____ Date: ___ / ___ / 20__

Office Use Only

Approved by: _____ Date: ___ / ___ / 20__