

Nomination Form

(Please note: a separate form must be completed for each member of each Customer Advisory Group)

* Denotes question is compulsory - incomplete nominations will be returned

*1. CUSTOMER ADVISORY GROUP NOMINATING FOR:

*2. NOMINATING ORGANISATION:

Groundwater users

Stock and Domestic water users

Industrial & Commercial water users

Aboriginal community representatives and cultural water users

Environmental water users

Public Water Utilities

Nominees should read the Customer Advisory Groups <u>Charter</u> and <u>Code of Conduct</u> before nominating. Click the fillable fields to type your responses into this form. Signatures can be added either using the fill and sign functionality of your PDF program, or by completing the other form fields then printing to manually sign.

Group/Organisation				
Name				
Position				
Address				
Phone				
Email				
I declare that the nominating organisation is a recognised water user group/organisation which represents the interests of the water users selected in section 3:				
*Signature				
Add your signature using the fill and sign functionality of your PDF program, or by completing the other form fields then printing to manually sign.				
*3. NOMINATING ORGANISATION'S CATEGORIES OF CUSTOMERS REPRESENTED:				
*WaterNSW Customers which are:		(select all that apply)	Approx. number of customers represented	
Small/medium/large water user types (tick all that apply): S M L				
Regulated river water users				
Unregulated river water users				

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*4. NOMINATED REPRESENTATIVE'S DETAILS:				
Name				
Address				
Phone				
Email				
Occupation				
*5. NOMINATED REPRESENTATIVE'S DECLARATION:				
As the nominated representative for my organisation, I agree to: • Always represent the constituents of my nominating organisation				
 Always provide regular feedback following all meetings, and at other times, to my water user group or organisation and its members 				
• Demonstrate	Demonstrate a willingness and ability to operate under the code of conduct for meetings			
Actively contr	Actively contribute to improvements in service delivery in my area			
 Share my contact details with members of the Customer Advisory Group for the purpose of Customer Advisory Group communications (email/phone) ** If you DO NOT wish to share your contact details with other members, please tick 				
I declare that, if using a motor vehicle for the purpose of travelling to and from WaterNSW Customer Advisory Group meetings:				
I hold a valid dr	I hold a valid drivers' licence			
The vehicle has Comprehensive Motor Vehicle Insurance				
The vehicle is registered and has Compulsory Third Party Insurance				
I will notify WaterNSW of any changes to this information				
*Signature of nominated representative:				
*Print Name: Date:				
6. EMERGENCY CONTACT DETAILS:				
Name				
Relationship				
Phone				

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7. ALTERNATE REPRESENTATIVE'S DETAILS (optional):				
(an approved alternate delegate may represent the nominating organisation if the primary delegate is unable to attend a Customer Advisory Group meeting. If both members are in attendance, only the primary member is eligible to claim sitting fees).				
Name				
Address				
Phone				
Email				
Occupation	on			
8. ALTERNATE REPRESENTATIVE'S DECLARATION:				
As the no	minated represe	ntative for my organisation, I agree to:		
•	Always represent the constituents of my nominating organisation			
•	 Always provide regular feedback following all meetings, and at other times, to my water user group or organisation and its members 			
•	Demonstrate a willingness and ability to operate under the code of conduct for meetings			
•	Actively contribute to improvements in service delivery in my area			
•	 Share my contact details with members of the Customer Advisory Group for the purpose of Customer Advisory Group communications (email/phone) ** If you DO NOT wish to share your contact details with other members, please tick 			
I declare that, if using a motor vehicle for the purpose of travelling to and from WaterNSW Customer Advisory Group meetings:				
•	I hold a valid drivers' licence			
•	The vehicle has Comprehensive Motor Vehicle Insurance			
•	The vehicle is registered and has Compulsory Third Party Insurance			
•	I will notify WaterNSW of any changes to this information			
Signature of nominated representative:				
Print Name: Date:				
9. EMERGENCY CONTACT DETAILS:				
Name				
Relationship				
Phone				

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9. APPOINTMENT TO CAG AT SOLE DISCRETION OF WATERNSW:

Appointment to the Customer Advisory Group (CAG) is at the sole discretion of WaterNSW who will determine whether you are a fit and proper person to be a member of a CAG. By filling in this form you accept and consent to WaterNSW conducting any relevant searches, background checks, criminal history checks and requesting references, as it deems appropriate.

Please upload your signed nomination form to

waternsw.com.au/CAG

or email cag.support@waternsw.com.au

For further information please phone 1300 662 077

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