



FOR OFFICIAL USE ONLY		
File number	<input type="text"/>	
Water use licence or registration number	<input type="text"/>	
Water management area	<input type="text"/>	
Received by:	<div style="border: 1px solid black; width: 100%; height: 100%;"></div>	
Surname		<input type="text"/>
Initials		<input type="text"/>
Rank		<input type="text"/>
Signature		<input type="text"/>
Captured by:		
Initials	<input type="text"/>	
	<i>Date stamp of receiving office</i>	