APPLICANT(S)				
(See Appendix A to re	egister a	dditional applicant	ts)	
LEGAL NAME:		thern Cross elines Australia Ltd	ACN/ABN:	64 084 521 997
TRADING NAME:  If different to legal na	me			
NORMAL BUSINESS ACTIVITY		Owns 62.7% of the Goldfields Gas Pipeline, and 100% of various pipelines connected to the Goldfields Gas Pipeline, including the Leinster Lateral Pipeline.		
REGISTERED POSTAL ADDRESS:		APA Group, Level 25, 580 George Street, Sydney NSW 2000, Australia		
CONTACT PHONE N	IUMBER		Adam Watson (0	2) 9228 8998
NON-SCHEME PIPE	LINE SU	BJECT TO THIS	APPLICATION	
PIPELINE NAME:		Leinster Lateral	Pipeline	
PIPELINE LICENCE NUMBER(S):		PL26		
LOCATION:  Details may include start and end points of the pipeline. Provide a map of the site as an attachment.		See attached — "PL 26 - NSCGP - GGP Leinster Map"		
NAMEPLATE RATING Maximum quantity of gas that can be trans, through the pipeline is under normal operation conditions (if available	natural ported n a day ng	78.5TJ/d		
THROUGHPUT: Volume of actual thro in previous 24 month and expectation for no 12 month period.	period	TJ/d (actual and forecast) (as of 9 March 2023)		
DESCRIPTION:  Provide details of the pipeline operation incommership of pipeline purpose or use of gas shipper(s) and user(s gas. A list of support documents may be at to this application to demonstrate how the pipeline meets the exemption criteria.	; s, ) of the ing	This lateral was built in 1996. It is an 8" diameter pipeline that is 5.2km long. Its operating pressure is 10.2MPag MAOP.  Single user pipeline.		

		ne access request and negotiations 3 and 4 of Part 23 of the NGR).	, and arbitration	of access	i
Category 2: exem	ption from in	nformation disclosure provisions (Di	vision 2 of Part	23 of the NGR).	
		nformation disclosure provisions (Dia and pipeline service information.	vision 2 of Part	23 of the NGR),	
		Category 1			
		The non-scheme pipeline does not provide third party access			
EXEMPTION		Category 2			
SOUGHT		The non-scheme pipeline does not provide third party access			
Tick all categories or criteria that	Ø	OR The non-scheme pipeline is a sin	gle shipper pipe	eline	
apply		Category 3			
*	Ø	The average daily injection of nat pipeline calculated over the immedess than 10TJ/day			
Have you previou this non-scheme		nted an exemption in relation to	☑ Yes	□ No	
DECLARATION					Ī
☑ I confirm that a attached in this ap		documents, including the Statutor	y Declaration an	d map, are	
		ircumstances change such that the anted by the ERA.	non-scheme pi	peline no longer	

PART B – VARIATION TO A CONDITION OF AN EXISTING EXEMPTION				
APPLICANT(S) - (See Appendix A to register additional applicants)				
LEGAL NAME:	ACN/ABN:			
TRADING NAME: If different to legal name				
NORMAL BUSINESS ACTIVITY				
REGISTERED POSTAL ADDRESS:				
CONTACT PHONE NUMBER				
EXEMPTION SUBJECT TO THIS APPLICATIO	N FOR VARIATION			
PIPELINE NAME:				
PIPELINE LICENCE NUMBER(S)				
Relevant exemption category(ies):		☐ Category 1 ☐ Category 2 ☐ Category 3		
Please set out the relevant condition(s) that you wish to vary on the existing approved exemption.				
Please provide the reasons why the condition(s) should be varied and the proposed variation. Alternatively, attach a document setting these out.				
All supporting documents to this application have been attached:	☐ Yes ☐ No If no, please explain:			

PART C – REVOCATION OF EXISTING EXEMPTION					
APPLICANT(S) – (See Appendix A to register additional applicants)					
LEGAL NAME:		ACN/ABN:			
TRADING NAME: If different to legal name					
NORMAL BUSINESS ACTIVITY:					
REGISTERED POSTAL ADDRESS:					
CONTACT PHONE NUMBER					
NON-SCHEME PIPELINE	NON-SCHEME PIPELINE SUBJECT TO THIS APPLICATION				
PIPELINE NAME:					
PIPELINE LICENCE NUMBER(S):					
LOCATION					
Relevant exemption category:		□ Category 1			
		☐ Category 2			
		☐ Category 3			
Please explain why the exe should be revoked. You ma attachment for additional in	ay include an				
All supporting documents to this application have been attached:		☐ Yes ☐ No If no, please explain:			
		4			

APPENDIX A – ADDITIONAL APPLICANTS				
ADDITIONAL APPLICANT 1				
LEGAL NAME:	ACN/ABN:			
TRADING NAME: If different to legal name				
NORMAL BUSINESS ACTIVITY:				
REGISTERED POSTAL ADDRESS:				
CONTACT PHONE NUMBER				
ADDITIONAL APPLICANT 2				
LEGAL NAME:	ACN/ABN:			
TRADING NAME: If different to legal name				
NORMAL BUSINESS ACTIVITY:				
REGISTERED POSTAL ADDRESS:				
CONTACT PHONE NUMBER				