APPLICANT(S)				
(See Appendix A to reg	gister a	dditional applicants	s)	
LEGAL NAME:	APT Ltd	T.Operations Pty ACN/ABN: 79 123 090 933		
TRADING NAME: If different to legal name				
NORMAL BUSINESS ACTIVITY		Leases Murrin-Murrin pipeline from APT Investment Trust and operates it. Owner of Eastern Gas Pipeline and Yamarna Gas Pipeline.		
REGISTERED POSTAL ADDRESS:		APA Group, Level 25, 580 George Street, Sydney NSW 2000, Australia		
CONTACT PHONE NU	JMBER		Adam Watson (02) 9228 8998	
NON-SCHEME PIPEL	INE SU	BJECT TO THIS	APPLICATION	
PIPELINE NAME:		Yamarna Gas Pipeline		
PIPELINE LICENCE NUMBER(S):		PL114		
LOCATION: Details may include sta and end points of the pipeline. Provide a ma the site as an attachme	p of	See attached — "PL 113 and 114 Mt Morgans and Yamarna Gas Pipeline map"		
NAMEPLATE RATING Maximum quantity of n gas that can be transpo- through the pipeline in under normal operating conditions (if available)	atural orted a day	98.0TJ/d		
THROUGHPUT: Volume of actual throug	eriod	TJ/d (actual and forecast) (as of 9 March 2023)		
in previous 24 month p and expectation for nex 12 month period.	ct			

		ne access request and negotiations, 3 and 4 of Part 23 of the NGR).	and arbitration o	f access	
Category 2: exem	ption from in	nformation disclosure provisions (Div	vision 2 of Part 23	3 of the NGR).	
		nformation disclosure provisions (Div and pipeline service information.	rision 2 of Part 23	3 of the NGR),	
		Category 1 The non-scheme pipeline does no	t provide third pa	arty access	
EXEMPTION SOUGHT		Category 2 The non-scheme pipeline does no	t provide third pa	arty access	
Tick all categories or criteria that	Ø	OR The non-scheme pipeline is a sing	gle shipper pipeli	ne	
apply.	Ø	Category 3 The average daily injection of natural gas into the non-scheme pipeline calculated over the immediately preceding 24 months is less than 10TJ/day			
Have you previously been granted an exemption in relation to this non-scheme pipeline?		☑ Yes	□ No		
DECLARATION					
☑ I confirm that a attached in this ap		documents, including the Statutory	Declaration and	map, are	
☑ I will notify the qualifies for any e		ircumstances change such that the anted by the ERA.	non-scheme pipe	eline 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 APPLICATION	ON FOR VARIATION		
PIPELINE NAME:	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 SUBJECT TO THIS APPLICATION				
PIPELINE NAME:				
PIPELINE LICENCE NUMBER(S):				
LOCATION		,		
Relevant exemption category:		☐ Category 1 ☐ Category 2 ☐ Category 3		
Please explain why the exemption should be revoked. You may include an attachment for additional information.				
All supporting documents to this application have been attached:		☐ Yes☐ No☐ If no, please explain:		

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				