Water Quality Data Release Application Form

Please fill in all relevant information boxes below. Providing insufficient information may result in unsuccessful approval. Should you have any queries, please contact [wqdata@sawater.com.au](mailto:wqdata@sawater.com.au).

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| **Details of the Person Requesting the Data:** (Place “X” in relevant box) | | | | | | | | | | | | | | | | | | | | | | |
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| Title: | |  | | Dr | | x | | Mr | |  | Ms | |  | Mrs |  | Miss | | | | Surname: | Busch | |
|  | | | | | | | | | | | | | | | | | | | | | | |
| First Name: | | | Brendan | | | | | | | | | | | | | | | | Occupation: | | Research Engineer | |
|  | | | | | | | | | | | | | | | | | | | | | | |
| Company *(if relevant)*: | | | | | | | The Uni of WA | | | | | | | | | | | Position *(if relevant)* | | | Senior Research Engineer | |
|  | | | | | | | | | | | | | | | | | | | | | | |
| Postal Address: | | | | | 35 Stirling Hwy, Crawley 6149  Western Australia | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
| E-mail Address: | | | | | [brendan.busch@uwa.edu.au](mailto:brendan.busch@uwa.edu.au) | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
| Phone: | 61 408 135577 | | | | | | | | Mobile: | | |  | | | | | SA Water Account No. *(if relevant)* | | | | |  |

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| **Data Request Information:** (Place “X” in relevant box) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Parameter | | x | | | | | **Physical parameters** | | | | | | | | | | | | | | | | | | | | | | |  | **Health chemical parameters**\* | | | | | | | | | | | | | |
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| Group: | |  | | | | | **Aesthetic chemical parameters** | | | | | | | | | | | | | | | | | | | | | | | x | **Biology**\* | | | | | | | | | | | | | |
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| (See page 2 for group descriptions) | |  | | | | | **Microbiological** \* | | | | | | | | | | | | | | | | | | | | | | |  | **Protozoology**\* | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  | | | | | ***\*******Approval for compliance data only*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Specific Details: | FRP, TP, Si, DOC, NOx, NO3, NO2, TKN, TN, chlorophyll, electrical conductivity, turbidity, pH, dissolved oxygen, temperature, total suspended solids | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Date Range: | From | | | | | | | | 1/01/2018 | | | | | | | To | | | | | 1/06/2019 | | | | | | | | | | | |  |  |  | | | | | | | | | | | | |
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| Locations: | All River Murray sites downstream of SA border | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Purpose for Data Request:** (Place “X” in relevant box) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| State the purpose for requesting the data (it is important to provide full details, to assist with approval. If insufficient space, please | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| attach separate sheet | | | | | | | Assessing the influence of environmental water provisions on nutrient and algal transport in the Lower Murray for the Commonwealth Environmental Water Office. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| The Organisation Requesting the data: | | | | | | | | | | | | | | | | | | | | | |  | | Member of the public (customer) | | | | | | | | | | | | | |  | Student | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | |  | | | | | Government agency | | | | | | | | | | | | |  | | SA Water Contractors | | | | | | | | | | | | | | x | University | | | | | |
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| How will the data be presented? | | | | | | | | | | | | | | | | | | | | | |  | | Internal Report | | | | | | | | | | | | | | x | External Report | | | | | |
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|  | | | |  | | | | |  | | | | | | | | | | | | |  | | Oral presentation | | | | | | | | | | | | | |  | School / university project | | | | | |
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| Preferred Method of data release | | | | | | | | | | | | | | | | | | | | | | x | | Excel spreadsheet | | | | | | | | | | | | | |  |  | | | | | |
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| Provide a summary of the report / presentation that the data will be included in: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |
| The data will be used to validate a water quality model for the Lower Murray. This modelling exercise will be a component of a larger study that will investigate the influence of environmental flow provisions on the ecological response within the Lower Murray. Provision of the data will be acknowledged accordingly. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Office Use Only | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Date application received: | | | | | | | | | | | Click for date | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
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| Data Prepared By: | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Sensitive/  Critical Issue: | | |  | | | | | Yes *(if yes, approval required)* | | | | | | |  | | | | No | | | | Approval given by: | | | | | |  | | | | | | | Date: | | | | Click for date | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Application Status: | | | | |  | | | | | Approved | | | |  | Declined | | | | | | | | Approval given by: | | | | | |  | | | | | | | Date: | | | | Click for date | | | | | |
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| Water Quality Data Released By: | | | | | | | | | | | | |  | | | | *(Authorised Officer)* | | | | | | | | | to: | |  | | | | | | | | | Date: | | | | Click for date | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Method of Release: | | | | | | |  | | | | | pdf document | | | |  | | | |  | | | | | | | | Data Return Date *(if required)*: | | | | | | | | | | | | | | Click for date | | | | |

To lodge the application please return the completed form to [wqdata@sawater.com.au](mailto:wqdata@sawater.com.au).

You will be notified as to the status of your application, within 10 working days once the completed application form has been received.

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| **Parameter Group Description%:** |

Physical parameters (includes hardness, pH, temperature, conductivity, total dissoleved solids, true colour, turbidity, alkalinity, langlier index, carbon dioxide, disinfectant residual and dissolved organic carbon.

Aesthetic chemical parameters#

Health chemical parameters#

Microbiological (*E.coli* and coliforms)

Protozoology (*Cryptosporidium and Giardia)*

Biology (Algae)

*% Note: not all parameters will always return a result for the chosen sampling location/area*

*# as per the 2011 NHMRC Australian Drinking Water Guidelines*