

Form 1

QUEENSLAND

Oaths Act 1867

STATUTORY DECLARATION

I, **Dr Matthew Lenahan**, of **Australasian Groundwater and Environmental Consultants Pty Ltd (1/60 Ingham Road West End, QLD 4810)**, do solemnly and sincerely declare that:

1. I meet the requirements outlined by the Environmental Protection Act 1994 (Environmental Protection Regulation 2008) to perform the role of a suitably qualified person (SQP), including chartered membership to a prescribed organisation (Royal Australian Chemical Society);
2. I am the project manager, technical lead and primary author of the report titled "G1937B_TCC MSJSTP Hydrogeologic and Hydrogeochemical Technical Assessment_v01.03", dated 16 September 2022, and submitted to the Queensland Department of Environment and Science (DES) on 20 September 2022; and
3. The intent of this report is to address the requirements for groundwater and surface water quality/quantity at the Mount Saint John Sewage Treatment Plant, as prescribed in the *Notice to conduct or commission an environmental evaluation* (Dept reference # 101/0008787, dated 21 September 2020)

and I make this solemn declaration conscientiously believing the same to be true and by virtue of the provisions of the *Oaths Act 1867*.

I declare that the contents of this statutory declaration are true and correct. Where the contents of this declaration are based on information and belief, the contents are true to the best of my knowledge and I have stated the source of that information and grounds for the belief.

I understand that it is a criminal offence to provide a false matter in a declaration, for example, the offence of perjury under section 123 of the Criminal Code.

I state that:

- A. This declaration was made in the form of an electronic document.*¹
- B. This declaration was electronically signed.*²
- C. This declaration was made, signed and witnessed under part 6A of the *Oaths Act 1867*.*³

(*delete whichever statements are not applicable)

DECLARED by

Dr Matthew James

Lenahan.....

at Townsville



.....
[signature of declarant]

04/10/2022.....

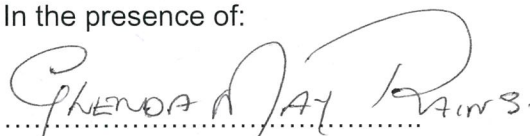
.....[date]

Signed for and at the direction of the declarant by*

.....
[insert full name of substitute signatory]*

**delete if not applicable*

In the presence of:



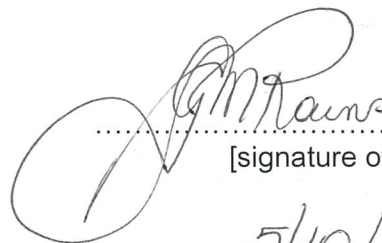
.....
[insert full name of witness]

Glenda May Rains
JUSTICE OF THE PEACE
(QUAL)

.....
[insert type of witness]⁴

.....
[insert name of law practice / witness's
place of employment]⁵

**delete if not applicable*



.....
[signature of witness]

5/10/22

.....
[date]

C/- JP Branch
Lvl 6/154 Melbourne Street
South Brisbane
Ph: 1300 301 147
E: jp@justice.qld.gov.au

For special witnesses to complete – Tick as applicable



I am a **special witness** under the *Oaths Act 1867*.
(see section 12 of the *Oaths Act 1867*)



This document was made in the form of an electronic document.⁶



I electronically signed this document.⁷



This statutory declaration was made, signed and witnessed under part 6A of the *Oaths Act 1867* – I understand the requirements for witnessing a document by audio visual link and have complied with those requirements.⁸

HOW THIS DOCUMENT WAS MADE

Please attach this page to your statutory declaration

NOTE: FAILURE TO COMPLETE THIS TABLE DOES NOT INVALIDATE THE DOCUMENT

The signatory (declarant) or substitute signatory must complete this section

| SIGNATORY / SUBSTITUTE SIGNATORY to complete | |
|---|---------------------------|
| Who signed this declaration? | |
| <input checked="" type="checkbox"/> | the signatory (declarant) |
| <input type="checkbox"/> | a substitute signatory |
| How did the signatory/substitute signatory sign? | |
| <input checked="" type="checkbox"/> | on paper |
| <input type="checkbox"/> | electronically |
| How was this declaration witnessed? | |
| <input checked="" type="checkbox"/> | in person |
| <input type="checkbox"/> | over audio visual link |

The witness must complete this section

| WITNESS to complete | |
|---|---|
| How did you (the witness) sign this document? | |
| <input checked="" type="checkbox"/> | on paper |
| <input type="checkbox"/> | electronically |
| What document did you (the witness) sign? | |
| <input checked="" type="checkbox"/> | The same physical (paper) document that was signed in the presence of the signatory/substitute signatory |
| <input type="checkbox"/> | A copy of the document that was signed by the signatory/substitute signatory (e.g a scanned copy of a paper signed document, a photocopy or printout) |
| <input type="checkbox"/> | A counterpart of the document (a copy of the document without the signature of the signatory/substitute signatory) |
| What form of document did you (the witness) sign? | |
| <input checked="" type="checkbox"/> | paper |
| <input type="checkbox"/> | electronic (tick this if you electronically signed the document or if you physically signed a copy of the document signed by the signatory/substitute signatory and then sent a scanned copy of that document to the signatory or other person) |
| How was the substitute signatory directed to sign (if applicable)? | |
| <input type="checkbox"/> | in person by the signatory |
| <input type="checkbox"/> | over audio visual link by the signatory |