



# Wildlife Act Authority:

Hold dead body

or any part of the dead

body of protected wildlife for Mātauranga / Cultural Practice.

**Application form 9j** 

For Marine Mammals, fill out Form 8 Activities involving Marine Mammals and Form 12b Holding, taking, importing, exporting marine mammals for non-research purposes.

### Using this application form

#### Completing the application



**Save** – You can save this application form to your digital device and edit or fill it in your own time.



Fill – You can fill this application digitally using Microsoft word.



**Print** – You can print this application form and fill it manually, or you can fill it digitally, then print it.



**Submit** – This application form can be submitted by email.



**Email** – Email your application and all the required labelled attachments to: permissions@doc.govt.nz

Important – Failure to complete this application form correctly may result in your application being returned to you seeking more information, which may extend the time it takes the Department of Conservation to process your application, or it may result in your application being declined. If you need help completing your application, please contact your local DOC office, or email permissions@doc.govt.nz

#### **Navigation**



**Hints** – Use the links through the hints column on the right hand side of the application form



**Scroll** – Simply use your mouse or keyboard arrows to scroll through the document page-by-page.

#### Application checklist

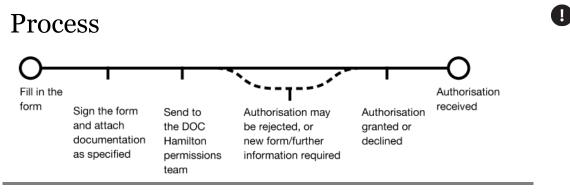
Have you included labelled attachments as required for your activities (including maps, testimonials, and consultations)?

Have you signed your application (digitally or manually)?

### Before you start

All efforts in putting together a detailed application are greatly appreciated and will allow the Department to effectively and efficiently process your application.

Please take the Process timeframes below into consideration when submitting your application.



An application is deemed complete when all information requested has been received.

Contact permissions@doc.govt.nz

## Section A | **Applicant details**

Full name of person who will hold the Authority (registered company, institute, organisation, or individual)			Enter your details in the white fields.
Legal status of applicant:  Individual  Research institute	Trust Other (specify)	Registered company	Please attach a copy of Trust Deed
Registration number (if compar	ny, trust or incorporated so	ociety)	
Trading name (if different from	applicant name)		
Any previous Authorisations he If yes, provide Authority numbe	<del></del>		
Postal address	Street addre	ess (if different from postal)	You must provide a New Zealand address for service.
Registered office of company o incorporated society (if application)			
Phone	Website		
Contact person and role			
Phone	Mobile		Please fill these three fields for your company contact
Email			person or if you are applying as an individual.

## Section B | Activities



1. To hold the dead body or any part of the dead body of protected wildlife

Provide a summary of what you want and why, include where the specimen(s) were/will be obtained from (e.g. DOC District Office):

Attach your proposal here and label as B.1

#### 2. Species name

List the common and scientific name/s of all protected species for which the authorisation is sought.

Ingoa Māori/Common name	Scientific name
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.
6.	6.



#### 3. Authorisation term and activity timeframes

Specify the start and end dates you would like your proposed agreement to cover.

Term:

4. Location where the body or part(s) of the body will be held

Provide the address and/or location where the dead body is to be held or stored.

Address/location:

- If you apply for more than 10 years, processing may take longer as longer term impacts will need to be assessed and there may be additional legal requirements.
- Page Authorisations and Special Conditions for your information.

## Section C | Iwi and Hapū support

Applications require support from local Mana Whenua. Please attach endorsement letters from either your iwi, hapū or marae and/or a locally recognised knowledge expert. If your Whakapapa are different, the Department can consult on your behalf.

#### Section D | Fees



The Department does not charge processing fees for non-commercial agreements for Mātauranga / cultural practice.

## Section E | **Declaration**

I certify that the information provided on this application form and all attached additional forms and information is to the best of my knowledge true and correct.

Signature (applicant)

Date (dd/mm/yyyy)

This application is made pursuant to Section 41of the Wildlife Act 1953.

Applicants should familiarise themselves with the relevant provisions of the Wildlife Act 1953.

The purpose of collecting this information is to enable the Department to process your application. The Department will not use this information for any reason not related to that purpose.

Applicants should be aware that provisions of the Official Information Act may require that some or all information in this application be publicly released.

An Agreement may be varied or revoked if the information given in this application contains inaccuracies.