9d

Wildlife Act Authority (Marine animals declared to be wildlife)

Application form 9d

This application form is only for activities involving marine species declared to be animals (Schedule 7A Wildlife Act 1953) and therefore protected under the Wildlife Act 1953 (please note this does not include marine mammals).

newzealand governmentThis application is made pursuant to section 53; 54; 55 and/or 56 of the Wildlife Act 1953; and section 38 of the Conservation Act 1987 (where applicable); and section 11 of the Marine Reserves Act 1971   
(where applicable).

|  |  |
| --- | --- |
| Using this application form | Exlamation_67 x67pxApplication checklist  Have you included labelled attachments as required for your activities (including maps, testimonials, and consultations)?  Have you read the section regarding liability of the applicant for payment of fees?  Have you checked if your application requires a CITES permit or EPA application and included these as applicable?  Have you signed your application (digitally or manually)? |
| Completing the application  FillSave**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**Print** – You can print this application form and fill it manually, or you can fill it digitally, then print it.  Submit**Submit** – This application form can be submitted by email or by post.  Email**Email** – Email your application and all the required labelled attachments to: permissions@doc.govt.nz  Post**Post** – Post your application and all the required labelled attachments to:  Statutory Process Team  Private Bag 3072 Hamilton 3240 |
| Navigation  ScrollHints**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. |  |

|  |  |
| --- | --- |
| Before you start  If the activity is to take place within a Marine Reserve you will also need authorisation under the Marine Reserves Act – Please note that a minimum of 2 months notice is required before undertaking your approved activity. | Exlamation_67 x67pxPlease complete the relevant [application form.](http://www.doc.govt.nz/get-involved/apply-for-permits/) |
| Process-diagramProcess | Exlamation_67 x67pxAn application is deemed complete when all information requested has been received. |
| Applications for proposals of activities are categorised as either standard or complex proposals:   * Standard proposals are those activities that are likely to have little or no significant effect on conservation values. See the fee section for information on what fees are likely to apply. * Complex proposals are those activities likely to have more significant effects, and therefore require careful consideration. See the fee section below for information on what fees are likely to apply. | Exlamation_67 x67pxPlease see also the [fees](#Fees) section. |
| Contact  Statutory Process Team  Private Bag 3072 Hamilton 3240  +64 27 308 8958 permissions@doc.govt.nz | Exlamation_67 x67pxIt is strongly advised that you contact DOC for advice and assistance on the application process before completing this form. |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Section A | Applicant details | | | | | | | | |  |
| Full name (registered company, institute, organisation, or individual)   |  | | --- | |  |   Legal status of applicant: | | | | | | | | | Exlamation_67 x67pxEnter your details in the white fields. |
| Individual  Research institute | | Trust | | | | | | Registered company | Exlamation_67 x67pxPlease attach a copy of Trust Deed |
| Other (specify) | | | | | |  | | --- | |  | | |
| Registration number (if company, trust or incorporated society)   |  | | --- | |  |   Trading name (if different from applicant name)   |  | | --- | |  |   Any previous Authorisations held?  Yes  No | | | | | | | | |  |
| If yes, please provide Authority number | | | | | |  | | --- | |  | | | | |
| Postal address   |  | | --- | |  | | | | | Street address (if different from postal)   |  | | --- | |  | | | | | | Exlamation_67 x67pxYou must provide a New Zealand address for service. |
| Registered office of company or incorporated society (if applicable) | | | |  | | --- | |  | | | | | | |  |
| Phone   |  | | --- | |  | | | | | | | Website   |  | | --- | |  | | | |  |
| Contact person and role | |  | | --- | |  | | | | | | | | |  |
| Phone   |  | | --- | |  | | | | | | | Mobile   |  | | --- | |  | | | | Exlamation_67 x67pxPlease fill these three fields for your company contact person or if you are applying as an individual. |
| Email   |  | | --- | |  | | | | | | | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Section B | Activities Applied For | | |  |
| 1. SPECIES NAME AND THREAT CLASSIFICATION   Please tick the species to which your application applies and note the threat classification (if species is listed) of all protected wildlife species for which authorisation is sought | | | Exlamation_67 x67pxThreat classifications can be found on the DOC website - [New Zealand Threat Classification System Lists.](http://www.doc.govt.nz/publications/conservation/nz-threat-classification-system/). |
| List of species | Threat Classification | ✓ |
| Black corals (all species in the order Antipatharia) | |  | | --- | |  | |  |
| Gorgonian corals (all species in the order Gorgonacea) | |  | | --- | |  | |  |
| Stony corals (all species in the order Scleractinia) | |  | | --- | |  | |  |
| Hydrocorals (all species in the family Stylasteridae) | |  | | --- | |  | |  |
| Basking shark (Cetorhinus maximus) | |  | | --- | |  | |  |
| Deepwater nurse shark (Odontaspis ferox) | |  | | --- | |  | |  |
| White pointer shark (Carcharodon carcharias) | |  | | --- | |  | |  |
| Whale shark (Rhincodon typus) | |  | | --- | |  | |  |
| Manta ray (Manta birostris) | |  | | --- | |  | |  |
| Spinetail devil ray (spinetail mobula) (Mobula japonica) | |  | | --- | |  | |  |
| Giant grouper (Queensland grouper) (Epinephelus lanceolatus) | |  | | --- | |  | |  |
| Spotted black grouper (Epinephelus daemelii) | |  | | --- | |  | |  |

|  |  |  |
| --- | --- | --- |
| Section B (continued) | Activities Applied For | | |
| 1. ACTIVITY    1. Actions to be undertaken   Please tick **all** the actions that are applicable to the activity you wish to carry out. | |  |
| Activity | ✓ |
| Catch and handle wildlife |  |
| Take samples from wildlife once caught |  |  |
| Take or destroy the eggs of wildlife |  |  |
| Mark – band, tag or attach other scientific apparatus (except bands) to wildlife |  |  |
| Catch and temporarily hold wildlife in captivity (for less than 3 months) |  |  |
| Hold wildlife in permanent captivity, if already held in captivity |  |  |
| Transfer captive animals from one holding facility to another facility |  |  |
| Export living animals and/or their live eggs \* |  | Exlamation_67 x67px\* Please note: Approval may also be required under the Trade of Endangered Species Act 1989 |
| Export dead specimens and/or their parts \* |  |
| Kill wildlife |  |
| Hunt, disturb, kill or catch alive protected wildlife that are causing damage (under section 54 of the Wildlife Act). |  |
| Hold dead specimen/s or parts |  |  |
| |  | | --- | | Other (specify): | |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Section B (continued) | Activities Applied For | | | |
| * 1. Purpose   Please tick or specify the purpose of the activity. | | |  |
| Purpose | | ✓ |
| Traditional/cultural use | |  |
| Species management | |  |  |
| Rehabilitation of sick/injured/orphaned animals | |  |  |
| Research | |  |  |
| Education | |  |  |
| Museum display/collection | |  |  |
| |  | | --- | | Other (specify): | | |  |  |
| * 1. Overview of the activity   Please briefly explain, provide an overview of the purpose of the activity here.   |  | | --- | |  | | | | Exlamation_67 x67pxPlease attach a copy of your proposal to this form and label Attachment B2.3 |
| 1. TERM AND TIMEFRAMES OF THE AUTHORISATION    1. Term.  Authorisations will be granted for a limited term. Please specify the start and end dates that you want your proposed authorisation to cover and explain why this term is sought eg “10 years” or “July 2015 – March 2015” | | | Exlamation_67 x67pxSee Authorisations and Special Conditions [for your information.](http://www.doc.govt.nz/get-involved/apply-for-permits/managing-your-concession/pre-application-meeting/) |
| Length of term:   |  | | --- | |  | | Reason:   |  | | --- | |  | | |  |
| *Note: If you apply for more than ten years, processing may take longer as long term impacts need to be assessed and there may be additional legal requirements.* | | |  |

|  |  |  |
| --- | --- | --- |
| Section B (continued) | Activities Applied For | | |
| * 1. Timeframes.  Please state, as accurately as you can, when the activity is proposed to take place (e.g. “during breeding season June – July 2014 and 2015”). If you can, please list specific dates (e.g. “June 22, July 14” etc).Please tick or specify the purpose of the activity.  |  | | --- | |  | | |  |
| 1. NUMBER TO BE CAUGHT, HELD OR KILLED   Where possible, please state:  (i) the target number of individuals of each species of protected wildlife to be caught, held or killed as far as applicable to your activity; and  (ii) what proportion of the local and global species population you estimate would be affected by your activity. | | Exlamation_67 x67px If your application is not to catch, hold or kill a live animal (i.e. you are applying to hold dead specimens) please go to [Question 10](#Holding). |
| Species | Number / Proportion of population and species |
| |  | | --- | |  | | |  | | --- | |  | |  |
| |  | | --- | |  | | |  | | --- | |  | |  |
| |  | | --- | |  | | |  | | --- | |  | |  |
| |  | | --- | |  | | |  | | --- | |  | |  |
| |  | | --- | |  | | |  | | --- | |  | |  |
| 1. METHOD/S   Please describe the methods to be used to safely, efficiently and humanely catch, hold or kill the animals. Please identify relevant animal ethics processes to be used.   |  | | --- | |  | | |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Section B (continued) | Activities Applied For | | | | | | |
| 1. TISSUE SAMPLES TO BE COLLECTED    1. Samples, Amounts and Methods   Please complete this section if tissue samples would be taken from the animals. List exactly what samples would be taken (e.g. blood, DNA etc) and the method/s to be used, including amounts to be taken (if known). | | | | | | Exlamation_67 x67pxIf no tissue samples are to be collected please go to [Question 7](#Marking). |
| Sample | Method | | | | Amount |  |
| |  | | --- | | 1. | | |  | | --- | |  | | | | | |  | | --- | |  | |
| |  | | --- | | 2. | | |  | | --- | |  | | | | | |  | | --- | |  | |
| |  | | --- | | 3. | | |  | | --- | |  | | | | | |  | | --- | |  | |
| |  | | --- | | 4. | | |  | | --- | |  | | | | | |  | | --- | |  | |
| |  | | --- | | 5. | | |  | | --- | |  | | | | | |  | | --- | |  | |
| * 1. Purpose for taking tissue samples      1. Please state the purpose for which the tissue samples would be taken (e.g. taxonomic purposes, genetic modification, disease screening etc) and whether or not they would be sent overseas. | | | | | |  |
| Purpose   |  | | --- | |  | | | | | | |  |
| Sending overseas: | | Yes | No | if you answered **Yes** please go to 6.2.2 otherwise got to 6.2.3 | |  |
| * + 1. Please state where it is proposed to send and store the samples. Please be aware that a CITES permit may also be necessary – please confirm on the DOC website [www.doc.govt.nz/about-doc/role/international/endangered-species/permits/](http://www.doc.govt.nz/about-doc/role/international/endangered-species/permits/)   Overseas facility address:   |  | | --- | |  | | | | | | |  |

|  |  |  |
| --- | --- | --- |
| Section B (continued) | Activities Applied For | | |
| * + 1. If it is proposed to take samples for the purpose of genetic modification please attach your Environmental Risk Management Authority (ERMA) application and label it **Attachment B 6.2**.  |  | | --- | |  | | | Exlamation_67 x67pxPlease attach ERMA application and label it **Attachment B 6.2**. |
| 1. MARKING / BANDING / TAGGING ETC   If you are marking wildlife with any other mark than a band please complete this section. Describe the type of marking to be used and details of the method to be used to attach it, to ensure the animal’s/ animals’ health and safety. | | Exlamation_67 x67pxIf you are not marking, banding or tagging animals please go to [Question 8](#Location). |
| Mark / tag apparatus to be fitted | Method |
| |  | | --- | |  | | |  | | --- | |  | |
| |  | | --- | |  | | |  | | --- | |  | |
| |  | | --- | |  | | |  | | --- | |  | |
| |  | | --- | |  | | |  | | --- | |  | |
| |  | | --- | |  | | |  | | --- | |  | |
| 1. LOCATION INFORMATION    1. Wild   State the area/s in which the activity will be carried out and why the site/s is the best option, please use NZTM GPS coordinates where possible. For specific sites please include a map (and GPS co-ordinates if available), and label it **Attachment B8.1**.   |  | | --- | |  | | | Exlamation_67 x67pxExlamation_67 x67pxIf the activity does not involve animals in the wild please go to [Question 8.2](#Captive).  Use [DOCgis](http://maps.doc.govt.nz/mapviewer/index.html?viewer=dto) to view Conservation Land.  Exlamation_67 x67pxPlease include a map (and GPS co-ordinates if available, and label it **Attachment B 8.1**. |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Section B (continued) | Activities Applied For | | | | |
| * 1. Captive   Please fill in this section if the activity involves live animal/s; specimen/s; or sample/s which are already in captivity. Fill in the following information for the person from whom the species/specimen/sample is to be obtained – NOTE: this person must also have an authorisation under the Wildlife Act | | | | Exlamation_67 x67pxIf the activity does not involve animals already captive please ensure you have answered [Question 8.1](#Wild). Then go on to [Question 11](#Management). |
| Name:   |  | | --- | |  | | DOC authorisation number and expiry date:   |  | | --- | |  | | | |
| Address:   |  | | --- | |  | | | | |
| 1. HOLDING LIVE ANIMALS   Please fill in this section if you currently hold animals in captivity and wish to continue to do so; or you wish to receive animals held in captivity at another facility; or you wish to hold animals for fewer than 3 months for rehabilitation.   * 1. Captive Management Programme | | | | Exlamation_67 x67pxIf you are not applying to hold live animals in captivity please go to [Question 10](#Holding). |
| Indicate whether you are part of a co-ordinated Captive Management Programme for the species: | | Yes | No |
| If yes, state the name of the DOC Captive Co-ordinator and whether or not he/she supports this application (attach written proof of that support and label it **Attachment B9.1**): | | | |
| Co-ordinator’s Name:   |  | | --- | |  | | | Supports application: | |  |
| Yes | No |
| * 1. Holding Site   Provide a detailed description of the holding facility/cage including dimensions. | | | |  |
| Holding site/address:   |  | | --- | |  | | Description of facilities:   |  | | --- | |  | | | | Exlamation_67 x67pxThe applicant must meet the requirements of the DOC Captive Management SOP (available [here](http://www.doc.govt.nz/get-involved/apply-for-permits/)) and the facility must meet the requirements of the husbandry manual for the species, where one exists. |

|  |  |  |
| --- | --- | --- |
| Section B (continued) | Activities Applied For | | |
| 1. HOLDING DEAD SPECIMEN/S OR PARTS    1. Purpose   Describe what the specimen/parts will be used for (e.g. museum collection). | | Exlamation_67 x67pxIf you are not applying to hold dead specimens or parts of them please go to [Question 11](#Management). |
| |  | | --- | |  | | |
| * 1. Location   Please state the address of the facility where the specimen/part will be held and how it will be looked after and, if relevant, how it will be disposed of. | |  |
| |  | | --- | |  | | |
| 1. MANAGEMENT OF EFFECTS   Please list all actual and potential adverse (or positive) effects of the proposed activity at the activity site, including effects on the target species, other indigenous species and the ecosystems at the site. Where adverse effects are identified please state what methods will be used to manage those effects. | | Exlamation_67 x67pxIf you are applying to hold dead specimens or parts of them please go to [Section C](#Experience). |
| Effect   |  | | --- | |  | | Method to manage:   |  | | --- | |  | |
| |  | | --- | |  | | |  | | --- | |  | |  |
| |  | | --- | |  | | |  | | --- | |  | |  |
| |  | | --- | |  | | |  | | --- | |  | |  |

| Section C | Applicant skills and experience | | | |  |
| --- | --- | --- | --- | --- |
| Please provide relevant information about your ability to carry out the proposed activity (e.g. details of previous authorisations, membership of professional organisations and relevant qualifications and experience). List the full names of all individuals who would be involved in the activity. | | | Exlamation_67 x67pxPlease attach details and label as Attachment C. | |
| All individuals involved in activity  Full Names   |  | | --- | |  | | | |
| Has the Applicant or any of the company directors, trustees, partners, or anyone involved with the Application been convicted of any offence? | Yes | No |
| If yes please provide details:   |  | | --- | |  | | | |
| Does the Applicant or any of the company directors, trustees, partners, or anyone involved with the Application have any current criminal charges pending before the court? | Yes | No |  | |
| If yes please provide details:   |  | | --- | |  | | | |  | |

| Section D | Consultation | |  |
| --- | --- | --- |
| Many applications require consultation with tāngata whenua (local Māori), and other interested parties. Please attach proof and details of all consultation, including with hapū or iwi, to this application and label as attachment D1.  Please attach any additional written expert views, advice or opinions you have obtained concerning your proposal to support the application and label them attachment D2. | Exlamation_67 x67pxIf you are unsure of any consultation requirements for your proposal, please see the [iwi consultation section](http://www.doc.govt.nz/get-involved/apply-for-permits/iwi-consultation/) or contact your [local DOC Partnerships office](http://www.doc.govt.nz/about-us/our-structure/regions/) to discuss what is required. | |
|  |

| Section E | Fees | |  |
| --- | --- | --- |
| Please note  This section only applies to applications with a commercial focus – which will include applications from registered companies. The Department does not charge fees for non-commercial Wildlife Act authorisations. | Exlamation_67 x67pxIf you are making an application for non-commercial activity, [proceed to declaration.](#Declaration) | |
| Processing fees  Section 60B of the Conservation Act contains the statutory provisions regarding processing fees.  The Department recovers all direct and indirect costs to process an application from applicants regardless of whether the application id approved or declined. If at any stage an application is withdrawn, the Department will invoice the applicant for the costs incurred by the Department up to that point.  Standard application fee  The estimated standard application fee is **$400 +GST**. This covers most applications. However if your application is likely to have significant effects, is novel, or spans multiple DOC regions, it will require more careful consideration and may take up to 6 weeks to process and cost approximately **$800 +GST.**  Particularly complex applications may incur further costs – you will be sent an estimate of costs in this situation. We will contact you to advise if the fee is more than the estimated standard cost. Applicants are also entitled to request an estimate of costs at any point, but the Department may impose a charge for preparing such an estimate. Estimates are not binding. | Exlamation_67 x67pxApplicants are required to pay the processing fees within 28 days of receiving an invoice. The Director-General is entitled to recover any unpaid fees as a debt. | |
| Paying fees  The Department will ordinarily invoice the applicant for processing fees after a decision has been made on the application, but in some cases interim invoices will be issued.  Please select your method of payment below. | Exlamation_67 x67pxIf you are applying from outside New Zealand we can process a credit card payment – please [contact us](#Contact) to request this procedure. | |
| I have attached a cheque  I have direct credited the DOC account  Please use the Applicant name and permission number (which the permissions team will give to you) as the references.  Department of Conservation  Westpac Bank  Account number: 03 0049 0002808 00  I do not intend to pay the fees at the time of applying and/or I require an  invoice for payment  I have a purchase order/number from an organisation registered with DOC   |  | | --- | |  | |

| Section E (continued) | Fees | | | | | |  |
| --- | --- | --- | --- | --- | --- | --- |
| Fee waivers and reductions  The Director-General has discretion to reduce or waive processing fees. You may apply for a fee waiver or reduction if you can provide information to the permissions team about how your application meets at least one of the following criteria.   * The activity will make a direct contribution to management | | | |  | | |
| * The activity will support or contribute to the Department’s priority outcomes – stated in the Department’s 2013 – 2017 Statement of Intent * There will be other non-commercial public benefits from the activities covered by the authorisation (if approved) * Activity covered by the authorisation (other than research, collection or educational activities) will make a contribution to the management of, or the public interest in, the lands that are covered by the authorisation   The Department may obtain further information either from the applicant or from any other relevant source in order to process the application. The applicant will be advised of any information obtained from other sources. The cost of obtaining such information will be charged to and recovered from the applicant. The applicant will be informed as soon as practicable from receipt of the application if further information is required before this application form can be fully processed by the Department. | | | | Exlamation_67 x67pxView the Department’s 2013 – 2017 Statement of Intent [here](http://www.doc.govt.nz/Documents/about-doc/statement-of-intent-2012-2017/statement-of-intent-2013-2017.pdf) for the priority outcomes. | | |
| Terms and conditions: Account with the Department of Conservation | | | |  | | |
| Have you held an account with  the Department before? | Yes | No |  |
| If **yes**, under what name?   |  | | --- | |  | | | | |
| Terms and conditions: Account with the Department of Conservation   1. I/We agree that the Department of Conservation can provide my details to the Department’s Credit Checking Agency to enable it to conduct a full credit check. 2. I/We agree that any change which affects the trading address, legal entity, structure of management or control of the applicant’s company (as detailed in this application) will be notified in writing to the Department of Conservation within 7 days of that change becoming effective. 3. I/We agree to notify the Department of Conservation of any disputed charges within 14 days of the date of the invoice. 4. I/We agree to fully pay the Department of Conservation for any invoice received on or before the due date. 5. I/We agree to pay all costs incurred (including interest, legal costs and debt recovery fees) to recover any money owing on this account. 6. I/We agree that the credit account provided by the Department of Conservation may be withdrawn by the Department of Conservation, if any terms and conditions of the credit account are not met. 7. I/We agree that the Department of Conservation can provide my details to the Department’s Debt Collection Agency in the event of non-payment of payable fees. | | | |  | | |
| Section E (continued) | Fees | | | | |  | |
| Reduction in fees for exceeding processing timeframe  If the Department fails to meet its own processing timeframes the estimate of fees will be reduced at a rate of 1% per day late, up to a maximum of 50% of the total processing fee. The reduction will not apply if the Applicant’s actions have delayed the process. | | | |  | | |
| Additional Fees  You may also be required to pay additional fees. These may include:   * Annual management fee to cover administration time; and/or * Monitoring fee to cover the cost of monitoring the effects of your activity. | | | | Exlamation_67 x67pxPlease [contact the Permissions team](#Contact) to discuss whether these fees apply. | | |

| Section G | 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. | | | | Exlamation_67 x67pxAn Authorisation may be varied or revoked if the information given in this application contains inaccuracies. | |
| Signature (applicant)   |  | | --- | |  | | Date (dd/mm/yyyy)   |  | | --- | |  | | | |
|  |  | | |
|  | | |  | |
| This application is made pursuant to Section/s 41(1)(g), 53; 54; 55; and/or 56 of the Wildlife Act 1953 [and (where applicable) Section/s 22; 49; 50; 51; 57; and/or 59 of the Reserves Act 1977; and/or Section/s 5; 13; 14(3) of the National Parks Act 1980; and/or 38 of the Conservation Act].  Applicants should familiarise themselves with the relevant provisions of the Wildlife Act 1953, the Conservation Act 1987, the Reserves Act 1977 and the National Parks Act 1980 relating to authorisations.  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. | | | |  | |
| For Departmental use | | | |  | |
| Credit check undertaken? | | Yes | No |  | |
| Comments   |  | | --- | |  | | | | |  | |
| Signed   |  | | --- | |  | | Name   |  | | --- | |  | | | |  | |
| Approved   |  | | --- | |  | | Name   |  | | --- | |  | | | | Exlamation_67 x67pxApproval is to be by a Tier 4 Manager or above. | |