

# Applicant Information Form 12b Holding, taking, importing, exporting marine mammals for non-research purposes

The Department recommends that you contact us to discuss the proposed activity prior to completing the application forms:

Permissions Advisor (Support)

Phone: +64 3 371 3700

Email: permissionschristchurch@doc.govt.nz

This form must be completed when applying for permits to hold, take, import, export marine mammals for non-research purposes ONLY. If you wish to hold, take, import, export marine mammals for research purposed please fill in Form 12a, available on the DOC website.

Please provide all information requested in as much detail as possible. Applicants will be advised if further information is required before this application can be processed by the Department.

Please note that the application process involves notification in the *Gazette* for 28 days (see s.5.5 of the Act), allow sufficient time when submitting the application for this to be undertaken.

Once you have filled in your application form, please complete this checklist to ensure that all components of your application are complete. This will help prevent any possible delays in the processing of your application.

Have you signed your application?
Have you read and accept the section regarding the liability of the applicant for payment of fees
Written consultations (if applicable)
Legal status (company/trust/inc society) registration number (if not an individual)

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

## A. Applicant Details **Applicant Name** Te Kāhui o Taranaki lwi Trust (full name of registered company or individual, student or university) **Legal Status of** Registered Incorporated Individual Trust applicant (tick) Company Society Other (please specify full details) Please supply the company, trust or incorporated society registration number: NZBN: 9429043377626 If an individual please supply your date of birth (this is a unique identifier for you): **Trading Name** (if different from Applicant name) PO Box 929, Taranaki Mail Centre Postal Address (of Applicant) Street Address (if different from One Young Street New Plymouth Postal Address) 06 751 4285 https://taranaki.iwi.nz/ Phone Website Wharehoka Wano / CEO **Contact Person and role** 06 751 4285 027 243 0454 Phone **Cell Phone** whare@taranaki.iwi.nz **Email** Mark Wipatene / Operations Manager **Contact Person and role** 06 751 4285 **Cell Phone** 027 230 5536 Phone mark@taranaki.iwi.nz **Email B. Details of Proposed Activity** ☐ Import Take Yes/ Hold ☐ Export **NB** please tick all applicable activities C. Purpose of Proposed Activity Description of activity To hold cultural materials post hauhake (harvesting) Species of marine mammal item/part (if known);

Balaene optera musculus brevicauda – juvenile female blue whale

Type of marine mammal item/part (eg tooth):

Vertebrae - 42; Vertebrae chimps 3; Fluke lobs 2; Ribs 28; Plates 23.

Number of marine mammal items/parts:

See above

How was the marine mammal item/part obtained:

Hauhake

Proposed dates for import/export if applicable:

NA

### D. Other

Is there any further information you wish to supply in support of your application?

All bones have been buried for 2-3 years: Seven buckets of oil are in storage,

# E. Consultation Undertaken

Some applications require consultation with whānau/hapū/iwi (local Māori), and other interested parties. Please contact the nearest Department of Conservation office to discuss what is required. Written expert views, advice or opinions concerning your proposal may also be attached to support the application. Attach any proof of consultation to the application.

# F. Fees

Section 60B of the Conservation Act enables the Department to recover all direct and indirect costs from an Applicant to process an application regardless of whether the application is 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. Applicants 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.

We will send you an estimate of fees before they are incurred and invoice you once we have processed your application. Please contact us for further information.

### Waiving or Reducing Fees:

The Director-General of Conservation has discretion to reduce or waive processing fees.

You may apply for a fee waiver or reduction if you provide information to the permissions team about how your application meets at least one of these criteria:

- The activity will make a direct contribution to management
- The activity will support or contribute to the Department's priority outcomes which are stated in the Department's 2013-2017 Statement of Intent (available on the DOC website)
- There will be other non-commercial public benefits from the permission (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 permit

### 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:
I have attached a cheque
I have direct credited the DOC account (please use Applicant name and MMRP as references) Department of Conservation Westpac Bank Account number: 03 0049 0002808 00
I have a purchase order/number from an organisation registered with DOC
Order number/purchase number:
I do not intend to pay the fees at the time of applying and/or I require an invoice for payment – I have filled in the Terms and Conditions for an Account with the Department of Conservation (following) with my own information.
Terms and Conditions for an Account with the Department of Conservation:
Have you held an account with the Department before? (Please tick)  Yes  No  If yes, under what name:

- 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.

### **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.

Note: The Director-General may vary any permit application contains inaccuracies.	t granted if the information given in this
Signature (Applicant)	Date 10/02/22
Signature (Witness)	Date 10/02/22
Witness Name MARAMA ANTA	WITEHIRA
Mitmaga Address	AVE, BELL BLOCK TARANAKI 4312.

This application is made pursuant to the Marine Mammals Protection Act 1978.

Applicants should familiarise themselves with the relevant sections of the Marine Mammals Protection Act 1978.

NOTE: Further information may be sought from you for this assessment if this application is not completed fully as required. 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 might require that some or all information in this application be publicly released.

For Departmental use only	
Credit check undertaken	
Comments :	
Signed	Name
Approved (tier 4 manager	Name