Statutory Land Management

Application Form

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Use this application for the following purpose(s):

* requesting a land status check.
* appointing an administering body.
* requesting to purchase or exchange public conservation land.
* Reserves Act consent.
* Public Works Act consent.
* Other requests relating to public conservation land managed by the Department of Conservation (DOC).

**Note:** Almost all land transactions require DOC to initially to complete a ‘land status check’ to investigate and verify the current land status in respect of:

* the Act1 under which a parcel of public land is administered;
* whether or not it is in a special category under that Act;
* which agency holds responsibility for the land;
* whether legal rights have been granted over the land or not;
* whether or not the land is subject to any special legal provision in any Provincial Ordinance, another Act, a trust created under a will, deed, or other instrument which is still in force;
* how the Crown acquired the public land;
* who has the administering responsibility of the land

1 New Zealand Acts, Bills and Legislative Instruments

## How do I complete this application form?

* Complete all sections of this form.
* DOC encourages electronic applications (e.g. a typed Word document), rather than handwritten applications. Electronic applications are easier to read and less likely to be returned to you for clarification.
* If you need extra space, attach or include extra documents - record the document details in sectionE Attachments.

Personal information will be managed by DOC confidentially. For further information check [DOC’s privacy and security statements](https://www.doc.govt.nz/footer-links/privacy-and-security/).

**How do I submit my application?**

Email queries and/or your completed application to the Statutory Land Management (SLM) team: slm@doc.govt.nz

## What happens next?

Once received, your application will be assessed by DOC. If your application is complete, it will be assigned to an SLM Advisor who will begin processing.

If your application is incomplete it will be returned to you for more information.

**Treaty Partner consultation**

DOC has a statutory responsibility to give effect to the principles of the Treaty of Waitangi. One component of this may be DOC consulting with Treaty Partners about your application. This consultation will feed into DOC’s decision-making process.

## Will my application be publicly notified?

Some applications may require public notification. An SLM Advisor will inform you if this will be required.

## What fees will I pay?

DOC recovers all direct and indirect costs to process an application, regardless of whether the application is approved or declined. There are standard processing fees for basic SLM processes, these can be found on the DOC website.

If your application is complex you will be notified and provided with an estimate of fees applicable. (Note: Estimates are not binding and may change).

DOC will invoice your processing fees after your application has been considered. If your application is large or complex, DOC may undertake billing at intervals periodically during processing until a decision is made. If you withdraw your application DOC will invoice you for the costs incurred up to the point of your withdrawal. You may be required to pay a processing fee for this application regardless of whether your application is granted or not.

Your application will set up a credit account with DOC. See the checklist at the end of the form for the terms and conditions you need to accept for a DOC credit account.

1. **Applicant details**

|  |  |
| --- | --- |
| **Legal status of applicant** **(tick)** | [ ]  **Individual** (Go to ➊) |
| [ ]  **Registered company** (Go to ➋) | [ ]  **Trust** (Go to ➋) |
| [ ]  **Incorporated society** (Go to ➋) | [ ]  **Local Authority** (Go to ➋) |
|  | [ ]  **Other** (Go to ➋) |

|  |  |  |
| --- | --- | --- |
| **➊** | **Applicant name (individual)** |  |
| **Phone** |  | **Mobile phone** |  |
| **Email**  |  |
| **Physical address** |  | **Postcode** |  |
| **Postal address (if different from above)** |  | **Postcode** |  |

|  |  |  |
| --- | --- | --- |
|  **➋** | **Applicant name(full name of registered company, trust, incorporated society, local authority or other)** |  |
| **Trading name(if different from applicant name)** |  |
| **NZBN** **(To apply go to:** [**https://www.nzbn.govt.nz**](https://www.nzbn.govt.nz) **)** |  | **Company, trust or incorporated society registration number** |  |
| **Registered office of company or incorporated society (if applicable)** |  |
| **Company phone** |  | **Company website** |  |
| **Contact person and role** |  |
| **Phone** |  | **Mobile phone** |  |
| **Email**  |  |
|  |
|  | **Postal address** |  | **Postcode** |  |
|  | **Street address (if different from postal address)** |  | **Postcode** |  |

1. **Pre-application meeting**

Have you had a pre-application meeting or spoken to someone in DOC in relation to this application?

|  |  |
| --- | --- |
| No  | [ ]  |
| Yes | [ ]  |
| If yes, state when and who you met/spoke with.  |
|  |

1. **Land Information details**

Site location (or closest rural/street address).

|  |
| --- |
|  |

Legal description:

|  |
| --- |
|  |

**Provide the following documents (as attachments)** and record the document details in the section E Attachments of this form:

* Mapof the site
* Aerial photo of the site
1. **Description of what is being applied for**

Select (by ticking the box) what you are applying for:

|  |  |
| --- | --- |
| Request for land status check | [ ]  |
| To be appointed as an administering body | [ ]  |
| Request to purchase or exchange public conservation land | [ ]  |
| Reserves Act Consent1 | [ ]  |
| Public Works Act consent2  | [ ]  |
| Other (*enter brief description*): | [ ]  |

1: Applications for Reserves Act Consent also require Form 1b to be completed and submitted.
 This form can be found on the DOC website, under Statutory Land Management, Application Forms.

2: Applications for Public Works Act Consent also require Form 1a to be completed and submitted.
 This form can be found on the DOC website, under Statutory Land Management, Application Forms.

**Describe in detail what you are applying for together with any other relevant information that DOC should be aware of:**

|  |
| --- |
|  |
|  |

|  |  |
| --- | --- |
| **Purchase Order Number (if applicable):** |  |

1. **Attachments**

|  |  |
| --- | --- |
| Maps: | [ ]  |
| Aerial Photos: | [ ]  |
| Other (*enter brief description*): | [ ]  |

1. **Checklist**

|  |  |
| --- | --- |
| Application checklist  | Tick  |
| I have completed all sections of this form relevant to my application and understand that the form will be returned to me if it is incomplete. | [ ]  |
| I certify that the information provided in this application form and any attached additional forms is, to the best of my knowledge, true and correct.  | [ ]  |
| I have supplied maps and/or aerial photos of the site(s). | [ ]  |
| For Applications for Reserves Act Consent or Public Works Act Consent (only) – completed Minister of Conservation Consent form is attached. | [ ]  |

**Email your completed application form(s) and attachments to**: slm@doc.govt.nz

1. **Terms and conditions for a credit account with the Department of Conservation**

|  |  |
| --- | --- |
| **Have you held an account with the Department of Conservation before?** | **Tick** |
| No | [ ]  |
| Yes | [ ]  |
| If “yes”, under what name: |  |
| **In ticking this checklist and placing your name below you are acknowledging that you have read and agreed to these terms and conditions for an account with the Department of Conservation** |
| **Terms and conditions** | **Tick**  |
| I/We agree that the Department of Conservation can provide my/our details to the Department’s Credit Checking Agency to enable it to conduct a full credit check. | [x]  |
| 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. | [ ]  |
| I/We agree to notify the Department of Conservation of any disputed charges within 14 days of the date of the invoice. | [ ]  |
| I/We agree to fully pay the Department of Conservation for any invoice received on or before the due date. | [ ]  |
| I/We agree to pay all costs incurred (including interest, legal costs and debt recovery fees) to recover any money owing on this account.  | [ ]  |
| 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 (as above) of the credit account are not met. | [ ]  |
| 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.  | [ ]  |
| **Applicant Name/s****(of authorised person/s)**  |  | **Date** |  |

|  |
| --- |
| **For Departmental use** |
| **Credit check completed** |  |
| **Comments:** |  |
| **Signed** |  | **Name** |  |
| **Approved (Tier 4 manager or above)** |  | **Name** |  |