

A. Applicant details

Legal status of applicant (tick)	<input type="checkbox"/> Individual (Go to ①)		
	<input type="checkbox"/> Registered company (Go to ②)	<input type="checkbox"/> Trust (Go to ②)	
	<input checked="" type="checkbox"/> Incorporated society (Go to ②)	<input type="checkbox"/> Other e.g. Educational institutes (Go to ②)	

①	Applicant name (individual)			
	Phone		Mobile phone	
	Email			
	Physical address		Postcode	
	Postal address (if different from above)		Postcode	

②	Applicant name (full name of registered company, trust, incorporated society or other)			Supporters of Tiritiri Matangi Inc.
	Trading name (if different from applicant name)			
	NZBN if applicable (to apply go to: https://www.nzbn.govt.nz)		Company, trust or incorporated society registration number	CC22809
	Registered office of company or incorporated society (if applicable)			
	Company phone	N/A	Company website	www.tiritirimatangi.org.nz
	Contact person and role			Carl Hayson, Chairperson
	Phone	9(2)(a)	Mobile phone	9(2)(a)
	Email			chairperson@tiritirimatangi.org.nz
	Postal address	Box 90-814, Victoria St West, Auckland	Postcode	1010
	Street address (if different from postal address)			Postcode

B. Pre-application meeting

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

No	<input checked="" type="checkbox"/>
Yes	<input type="checkbox"/>

- If yes record the:

Date of DOC pre-application meeting	
Name of DOC staff member	
Name of person who had the pre-application meeting with DOC	

C. Activity applied for

Tick the **activity application form** applicable to the activity you wish to undertake on public conservation land. Complete the applicant information form and the activity application form and email them with any attachments to permissions@doc.govt.nz

ACTIVITY APPLICATION FORM*	FORM NO.	TICK
Grazing	2a	<input type="checkbox"/>
Land use: Tenanting and/or using existing DOC facility/structure	3a	<input type="checkbox"/>
Land use: Use of public conservation land for private/commercial facility/structure	3b	<input checked="" type="checkbox"/>
Guiding/Tourism/Recreation: Watercraft activities	4b	<input type="checkbox"/>
Filming	5a	<input type="checkbox"/>
Sporting Events	6a	<input type="checkbox"/>
Marine reserves application form: Structure in a marine reserve	11a	<input type="checkbox"/>
Other activities (not covered in the above forms or in the new activity application forms that combine applicant and activity information)	7a	<input type="checkbox"/>

Note: If the activity is not in this list check the activity on the DOC website to find the correct application form or book a pre-application meeting. Application forms that combine applicant and activity information on the DOC website include:

- [Aircraft activities](#)⁸
- [Easements](#)⁹
- [Land based guiding](#)¹⁰

⁸ <https://www.doc.govt.nz/get-involved/apply-for-permits/business-or-activity/aircraft-activities/>

⁹ <https://www.doc.govt.nz/get-involved/apply-for-permits/business-or-activity/access-easements/>

¹⁰ <https://www.doc.govt.nz/get-involved/apply-for-permits/business-or-activity/land-based-guided-activities/>

D. Are you applying for anything else?

Are you submitting any other application forms in relation to this application?

No	<input checked="" type="checkbox"/>
Yes	<input type="checkbox"/>

- If yes, state which application forms:

E. Background experience of applicant

Provide relevant information relating to your ability to carry out the proposed activity (e.g. details of previous concessions, membership of professional organisations, and relevant qualifications).

We are an existing Concessionaire (refer Concession No. AK-0090-SER dated 21 March 2003) requesting a rollover of an existing lease. We have operated educational and shop facilities on the site since 2003 after completing the construction of the centre. We have a Health and Safety Plan for this Site. We are consulting directly with iwi about renewing this lease.

F. Attachments

Attachments should *only* be used if there is:

- Not enough space on the form to finish your answer
- You have additional information that supports your answer
- You wish to make an additional request of DOC regarding the application.

Label each document clearly and complete the table below.

Section of the application form the attachment relates to	Document title	Document format (e.g. Word, PDF, Excel, jpg etc.)	Description of attachment
<u>Correct example</u> ✓ D	Locations	PDF	Trust Deed.
<u>Incorrect example</u> X Table	Doc1	Word	Table
C	Visitor Centre		Plan of Lease Area

G. Checklist

Application checklist	Tick
I have completed all sections of this applicant information form relevant to my application and understand that the form will be returned to me if it is incomplete.	<input checked="" type="checkbox"/>
I certify that the information provided in this applicant information form, and any attached additional forms is, to the best of my knowledge, true and correct.	<input checked="" type="checkbox"/>
I have completed the activity application form .	<input checked="" type="checkbox"/>
I have appropriately labelled all attachments and completed section F Attachments .	<input checked="" type="checkbox"/>
I will email permissions@doc.govt.nz my: <ul style="list-style-type: none"> • Completed applicant information form • Completed activity application form/s • Any other attachments. 	<input checked="" type="checkbox"/>

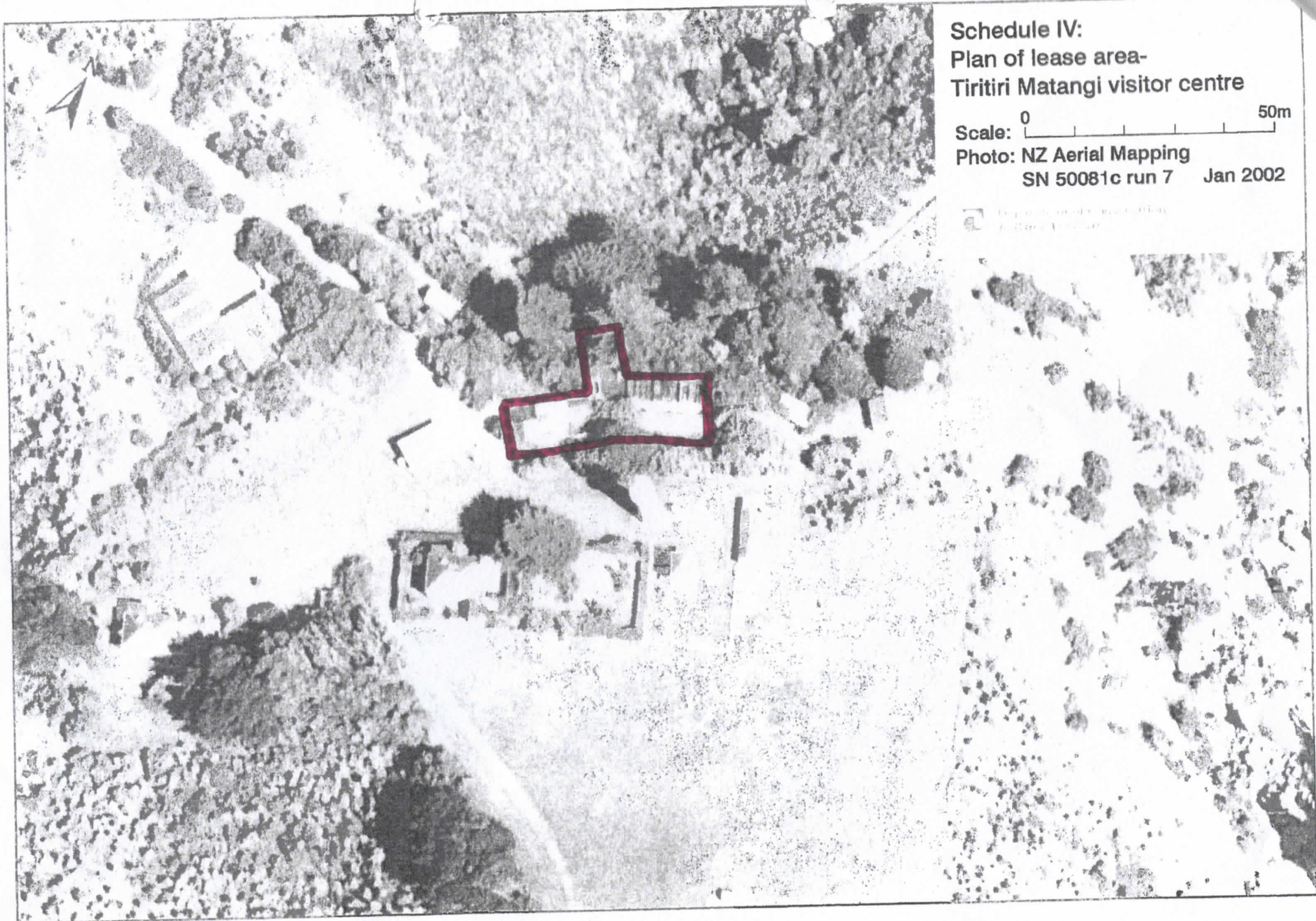
H. Terms and conditions for a credit account with the Department of Conservation

Have you held an account with the Department of Conservation before?	Tick
No	<input type="checkbox"/>
Yes	<input checked="" type="checkbox"/>
If 'yes' under what name	Supporters of Tiritiri Matangi Inc.

In ticking this checklist and placing your name below you are acknowledging that you have read and agreed to the 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.	<input checked="" type="checkbox"/>
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.	<input checked="" type="checkbox"/>
I/We agree to notify the Department of Conservation of any disputed charges within 14 days of the date of the invoice.	<input checked="" type="checkbox"/>
I/We agree to fully pay the Department of Conservation for any invoice received on or before the due date.	<input checked="" type="checkbox"/>
I/We agree to pay all costs incurred (including interest, legal costs and debt recovery fees) to recover any money owing on this account.	<input checked="" type="checkbox"/>
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.	<input checked="" type="checkbox"/>
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.	<input checked="" type="checkbox"/>
Typed applicant name/s	Supporters of Tiritiri Matangi Inc.
Date	30 June 2020

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



**Schedule IV:
Plan of lease area-
Tiritiri Matangi visitor centre**

Scale: 0 50m

Photo: NZ Aerial Mapping
SN 50081c run 7 Jan 2002

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