

APPLICATION to use a declared weed, or potential weed

Section 30, *Weeds Management Act 2001*

Please note the following:

Once received a minimum of four weeks is required for processing your application. If you are requesting to use a weed that has not yet been assessed using the Northern Territory Weed Risk Management System then your application will not be finalised until that assessment has been completed.

- Your application will not be accepted unless ALL required information is lodged with the application and the prescribed fee (if any) has been paid.
- Please print clearly as processing of your application will be delayed if the information supplied is illegible.
- A permit will not be processed if you have any outstanding matters arising under another permit issued under the *Weeds Management Act 2001* (for example outstanding reports).
- Permits are issued subject to conditions. You may be required to comply with a Weed Management Plan as part of those conditions.
- The grant of a permit does not imply approval for any other permit or licence which might be required. Applicants should contact relevant agencies for information, for example:
 - Permits or licences issued under the provisions of the *Northern Territory Water Act 1992*.
 - Applicants should contact the Water Resources of this department on 08 8947 1613 for advice on surface and ground water extraction and drilling.
 - Permission to enter land. You must negotiate this separately with the owner or manager of the land, or if on Aboriginal lands or waters, contact the relevant Land Council for approval under the *Aboriginal Land Rights (NT) Act 1976*.
 - Permits issued under provisions of the *Northern Territory Aboriginal Sacred Sites Act*.
 - If a permit is granted, the applicant should contact the Aboriginal Areas Protection Authority (on 08 8981 4700 or 08 8952 6366) before commencing any activities.
 - Permits issued under provisions of the *Northern Territory Planning Act*. Applicants should contact the Northern Territory Department of Infrastructure, Planning and Logistics 08 8999 5511 in regard to all planning, development and land use consent issues.

If you intend to import the weed from another country, your application will not be processed until you have provided evidence of your authority to import that weed into Australia provided by the Australian Quarantine and Inspection Service (AQIS).

You may be required to lodge a bond that is sufficient to provide a security against costs and expenses that may be incurred to prevent the spread of a declared weed as a result of action taken under a permit. Any bond must be lodged before the permit will be issued.

- If insufficient space is provided, please attach further pages to the rear of the application.
- **The Minister has the right to grant, or refuse to grant, a permit.**

DOCUMENTS TO BE LODGED WITH APPLICATION

a)	Completed Application Form for a Permit to Use a Declared Weed.	<input type="checkbox"/>
b)	Proof of Registration of Business or trading name.	<input type="checkbox"/>
c)	Evidence of managerial capacity and qualifications to satisfy the safeguards and risks associated with the proposed application.	<input type="checkbox"/>
d)	Previous permit(s) issued under the NT <i>Weeds Management Act 2001</i> or similar permit issued under any other State or Federal Authority.	<input type="checkbox"/>
e)	Site plans. It should be noted that these plans may be made available for inspection by members of the public at any stage of the application process. In the event that a permit is granted by the Minister, the plans will be held by the Director and will remain available for public inspection, upon request.	<input type="checkbox"/>
f)	Proof of title, lease or right to occupy the land. (Note: If an applicant seeks to provide a copy of a contract for the sale of land or a lease of the relevant land, such documentation must be legally executed). If the applicant is a tenant (lessee) and the relevant lease or tenancy agreement does not clearly authorise the use of the premises for the proposed purpose, the further consent of the landlord to such use should be provided.	<input type="checkbox"/>
g)	Certificate or evidence confirming that Planning approval has been given or is permitted for the proposed use at the relevant address or location.	<input type="checkbox"/>
h)	Relevant export and import permits for export or import to/from another State, Territory or country.	<input type="checkbox"/>
i)	Description of the proposed use sought, detailing the proposal and containing details of proposed methods of operation, distribution, risk management, environmental monitoring etc. The information sought above is generally contained in a business plan.	<input type="checkbox"/>

GUIDELINES – SITE PLANS

A site plan for the proposed property outlining:

1. The north point, area of the existing parcel and boundary dimensions, names of adjacent streets/roads
2. Existing and proposed buildings, bores or other improvements (including internal fencing boundaries)
3. Any existing and proposed easements, substations, services or reserves
4. Natural waterways, water courses etc. Contours at not greater than 2m intervals, flood lines, tidal surge lines, seepage lines and other natural features
5. Vehicle access points, entrance/exit points
6. Areas or sites of conservation, cultural or heritage significance, retained native vegetation, constrained land (i.e. subject to water logging)

A site plan for neighbouring properties outlining:

- a) area of the existing parcels and boundary dimensions, names of adjacent streets/roads

WHO MAY SIGN THE APPLICATION FORM?

Where the applicant is:

- a) a natural person – the natural person;
- b) a partnership – as per the partnership agreement, otherwise, all partners;
- c) or a company at least one of the Directors and the Secretary.

1. APPLICANT DETAILS:**Individual**

Given names:	
Surname:	
Date of birth:	
Residential address:	
	Post code:
Postal address:	
	Post code:
Business:	
Home:	
Mobile:	
Email:	

Company or partnership

Company or partnership name: <i>*Attach copy of Registration of Business or trading name</i>	
ACN:	
Company address:	
	Post code:
Postal address:	
	Post code:
Person responsible for management of the project: <i>*Attach evidence of managerial capacity and qualifications</i>	

Given names:	
Surname:	
Business:	
Home:	
Mobile:	
Email:	

2. PERIOD PERMIT SOUGHT:

From:	To:
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3. PREVIOUS PERMITS:

1. Have you previously held a permit issued under the *Weeds Management Act 2001*?

Yes No

If 'yes', please specify most recent permit number: _____

2. Have you ever applied to any other State or Federal Authority for a similar permit?

Yes No

If 'yes', please provide details on an attached sheet.

4. SPECIES FOR WHICH A PERMIT IS REQUIRED

(Please include scientific name as common names vary):

Scientific Name	Common Name	Quantity

5. PURPOSE FOR COLLECTION OR USE:

Provide reasons for the collection and/or use of the weed.

(Why are you collecting the weed? What do you intend doing with the weed?)

6. PROPOSED METHODS OF OPERATION, DISTRIBUTION:

Describe how you intend to grow, produce, propagate, refine/manufacture, and distribute the endproduct or weed in any of its forms. **Attach separate sheet if required*

7. RISK MANAGEMENT MEASURES

Specify the measures to be employed in relation to weeds, fire, soil, land and vegetation degradation to ensure prevention of weed spread. **Attach separate sheet if required.*

8. ENVIRONMENTAL MONITORING

Provide details of environmental monitoring procedures employed on site to ensure the safehandling of the weed. **Attach separate sheet if required.*

9. SOURCE OF WEED:

Specify the address where the weed will be collected or purchased.

Name of Landholder / Company:	
Address:	
	Post code:
Contact Phone: (BH)	
Nature of source enterprise:	

10. LOCATION WHERE WEED WILL BE USED/STORED:

**Attach site plans, proof of title, and evidence that proposed use has planning approval*

Property details:

Property Name	
Town/Hundred/Locality	
Parcel and/or Unit No.	
LTO Plan	
Number and Street Name	
Zone	

Is the applicant the land owner?

Yes No

If 'no', please provide details.

Owners name(s)	
Postal Address	
Contact Phone (BH)	

**Attach owner's authorisation, lease or right to occupy the land if applicant is not the land owner.*

11. NEIGHBOURING PROPERTIES:

Describe the nature of properties immediately surrounding the proposed use site and any likely orperceived adverse impacts on adjacent land.

**Attach plans outlining area of existing parcels and boundary dimensions.*

12. HANDLING AND QUARANTINE PROCEDURES:

Specify the methods proposed to be used to ensure the safe handling of the weed to prevent itsspread. Include methods for collection, transport and subsequent storage.

Collection

Transport

**Note: Under section 9 of the Act, a person must not transport or carry a declared weed, or anything that contains a declared weed, except in accordance with a permit.*

Storage

13. DISPOSAL PROCEDURES:

Specify the location and methods proposed to be used to dispose of the weed at the expiry of the permit (if granted).

Location:	Method of disposal:

14. EXPORT:

1. Do you intend to export the weed to another State or Territory or country?

Yes No

2. Is the weed declared or specified as a weed in that State, Territory or country?

Yes No

If 'yes', you must provide evidence of your approval/permit from that State, Territory or country to import the weed.

Form of approval:	Permit: <input type="checkbox"/>	Other: <input type="checkbox"/>
Permit number:		
Date of issue:		
Date of expiry:		
If Other, please specify:		
Authority attached:	Yes <input type="checkbox"/> No <input type="checkbox"/>	
<p><i>NOTE: Your permit application will not be processed if a copy of the relevant AQIS authority is not attached.</i></p>		

15. IMPORT:

Australian State or Territory

1. Do you intend to import the weed from another State or Territory?

Yes No

2. Is the weed declared or specified as a weed in that State/Territory?

Yes No

If 'yes', have you obtained a permit to export the weed from that State or Territory? Provide details

Permit number:	
Date of issue:	
Date of expiry:	
Authority attached:	Yes <input type="checkbox"/> No <input type="checkbox"/>

Overseas Country

3. Do you intend to import the weed from another country?

Yes No

If 'yes', have you obtained a permit to export the weed from that country? Provide details

Permit number:	
Date of issue:	
Date of expiry:	
Authority attached:	Yes <input type="checkbox"/> No <input type="checkbox"/>

4. Is the weed declared or specified as a weed in that country?

Yes No

If 'yes', have you obtained a permit to export the weed from that country? Provide details.

Permit number:	
Date of issue:	
Date of expiry:	
Authority attached:	Yes <input type="checkbox"/> No <input type="checkbox"/>

5. Do you have authority from the Australian Quarantine and Inspection Service (AQIS) to import the weed?

Yes No

If 'yes', provide details.

Form of approval:	Permit: <input type="checkbox"/>	Other: <input type="checkbox"/>
Permit number:		
Date of issue:		
Date of expiry:		
If Other, please specify:		

16. EXPERIENCE:

Provide details of your relevant experience in handling and managing a declared weed.

** Attach separate sheet if required.*

DECLARATION

I do solemnly and sincerely declare that the details given in this application are true in every particular and I make this solemn declaration by virtue of the Oaths Act.

(Note: There are heavy penalties for false declarations)

Applicant's signature: _____ Date: _____

Applicant's signature: _____ Date: _____

Section 30(7) of the Weeds Management Act provides for a penalty of not less than \$5,000 and not more than \$50,000 for a person, or not less than \$25,000 and not more than \$250,000 for a body corporate found guilty of an offence against section 30 of the Act.

The Weed Management Branch adheres to the Privacy Statement of the Department of Environment, Parks and Water Security which can be found at: depws.nt.gov.au

CONTACT DETAILS

Weed Management Branch

PO Box 496 Palmerston NT 0831

Level 3, Goyder Centre, 25 Chung Wah Terrace, Palmerston NT 0830 T: 08 8999 4567

E: weedinfo@nt.gov.au W: nt.gov.au/weeds

OFFICE USE ONLY

Date application received:	
Amount paid:	
Receipt number:	
Previous returns submitted:	Yes <input type="checkbox"/> No <input type="checkbox"/>
Interstate / Overseas authority to export attached:	Yes <input type="checkbox"/> No <input type="checkbox"/>
AQIS authority to import attached:	Yes <input type="checkbox"/> No <input type="checkbox"/>
Permit approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>
Bond required:	Yes <input type="checkbox"/> No <input type="checkbox"/>
Date Bond paid:	
Receipt number:	
Permit number:	
Date permit issued:	