**Application for Permit FOR Noxious Weeds**

Please complete **ALL RELEVANT** sections and write in **BLOCK LETTERS.**

## 1. Applicant details (All applicants must complete this part)

|  |  |
| --- | --- |
| Have you ever held a permit under the *Catchment and Land Protection Act 1994* ? If yes, insert permit number  | [ ]  Yes [ ]  No Permit number:       |
| Applicant title (Mr/Mrs/Miss/Dr/Prof)  |       |
| Applicant Surname |       |
| Applicant First name  |       |
| Address |       |
| Town/suburb |       |
| State |       |
| Postcode |       |
| Telephone (business hours) |       |
| Mobile |       |
| Fax |       |
| Email |       |
| Postal address(if different from street address) |       |
| Town/suburb |       |
| State |       |
| Postcode |       |

## 1a Company Applicant Details (if applicable)

|  |  |
| --- | --- |
| Business name  |       |
| ABN/ACN |       |
| Name of Primary Contact  |       |
| Postal address  |       |
| Town/suburb |       |
| State |       |
| Postcode |       |
| Telephone (business hours) |       |



## 2. Permit Purpose (All applicants to complete)

|  |  |
| --- | --- |
| Purpose of permit application | [ ]  Buy [ ]  Sell [ ]  Posess for the purpose of sale[ ]  Plant/Propagate [ ]  Import [ ]  Transport [ ]  Deposit on Land  |
| Provide details of the intended purpose for the permit |       |

## 3. Specified Premises

* Complete this part if possessing weed/s (i.e. this section is not required for transport only applications)
* This must refer to the actual place where the noxious weed/s will be kept. If same as address provided in Part 1 write “as Part 1” in the space provided for property name

|  |  |
| --- | --- |
| Property name  |        |
| Location address  |       |
| Postcode  |       |
| State  |       |

## 4. Noxious weed Details (All applicants to complete this part)

|  |  |  |
| --- | --- | --- |
| Quantity | Scientific name | Common name |
|       |       |       |
|       |       |       |
|       |       |       |
|       |       |       |
|       |       |       |
|       |       |       |
|       |       |       |
|       |       |       |



## 5. Provider or source of Noxious weed details

|  |  |
| --- | --- |
| Surname  |       |
| First name  |       |
| Company name (if applicable) |       |
| Address of where weeds are to be collected from/sourced  |       |
| Contact phone  |       |
| Permit number (if applicable)  |       |

## 6. Details of intended recipient or disposal location of Noxious Weed/s

##

|  |  |
| --- | --- |
| Surname  |        |
| First name |       |
| Company name (if applicable)  |       |
| Address of where weeds are to be deposited at  |       |
| Contact phone  |       |
| Permit number (if applicable)  |       |

***Note – if you require more space or have more than one provider, source or intended recipient of the plants, please attach a separate sheet with this information.***

## 7. Control of Noxious Weeds (All applicants to complete this part)

* Provide a description of the measures taken to ensure the containment of noxious weeds (where applicable attach supporting documentation to application e.g. company weed spread control procedures; details of storage and transportation containers; any applicable certifications etc.)

|  |
| --- |
|       |



## 8. Length of Time of Permit (All applicants to complete this part)

##

|  |  |
| --- | --- |
| Permit start date  |       |
| Permit end date  |       |
| Justification for time frame required (e.g. length og research project; estimated time frame to complete removal or transportation jobs etc)  |       |

## 9. Applicant declaration (All applicans to complete this part)

##

|  |
| --- |
| I, (full name)      of (address)      hereby declare that all details provided by me on this form and in any supporting documentation are true and correct.Signature      Date       |

**Send your completed application form and supporting documentation to:**

**Post:** Noxious Weed Permit Administrator

Agriculture Victoria

P.O. Box 441

Echuca Victoria 3564

**OR**

**Email:** weed.permits@ecodev.vic.gov.au

**Agriculture Victoria will endeavour to respond to this application within five business days.**

**The lodging of any application does not in itself carry any entitlement or right.**

**The outcome of any application cannot be predicted and should not be anticipated.**

**Copy and attach additional pages if required.**

Agriculture Victoria is collecting your personal information for the purposes of the Catchment and Land Protection Act 1994. This may include using the personal information to determine the origin, destination, sender and receiver of noxious weed/s declared under the Catchment and Land Protection Act 1994. Personal information collected in the permit application includes that of the key contact, sender, and recipient of the described noxious weed/s. You must only provide this information on the person’s behalf if you have the consent of the person to provide their personal information.

This information may be provided to other State or Commonwealth Government bodies for the purposes of biosecurity, or in the case of other natural disasters and emergencies.

Any personal information collected, held, managed, used, disclosed, or transferred will be held in accordance with the Privacy and Data Protection Act 2014 and other applicable laws. DJPR is committed to protecting the privacy of personal information. You may contact us to request access to your personal information, or for other concerns regarding the privacy of your personal information, by emailing the Department’s Privacy Unit at privacy@ecodev.vic.gov.au. The Department’s privacy policy is also available by emailing the Department’s Privacy Unit.