Form 1: Application to register as an Amateur Fishing Charter Vessel Operator



(Note: you will need to finish this application online by providing the details of the vessels you propose to use)

PART 1: Operator details

Please complete **either** section A **or** Section B by choosing which section best describes your amateur fishing charter vessel operation. After completion move onto sections C and D.

	Company	Incorpora	ted Society	
name of Company or Inc	corporated Society			
Or complete Section	R if you are an Ind	lividual Partn	orchin Truct 1	nint Individuals
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Please tick one:	Partnership	Trust	Individual	Joint Individuals
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Trading AsPlease specify your trading name (if any).

All Applicants must provide the following business details where applicable

Trading as (if applicable)

Commencement date Commencement date Commencement date	company		
Please indicate whether or not the entity or scene and another processor another processor and another processor another processor and another processor another processor and another processor and another processor and a		Commencement date	
Commercial Client Number f you are a ro have been a commercial client number Please tick here if the following details are the same as your commercial details and you would like to advise Fishserve of these changes. Daytime telephone number Telephone Numbers After hours telephone number After hours telephone number Mobile Fax (if applicable) Fax (if applicable) Fax (if applicable) Finall Website (if applicable) I do not want to receive any listing-related communications by email I do not want to receive any listing-related communications by email Postal Address Fyou have a Registered Office Postal address, please provide this otherwise please sperify the applicant's Residential votal Address Postal Address Postal Address Postal Address is physical Address is physical Address is provide this otherwise lease sperify the applicant's Residential votal Address is provide this otherwise lease sperify the applicant's Residential votal Address is provide this otherwise lease sperify the applicant's Residential votal Address is provide this otherwise lease sperify the applicant's Residential votal Address is provide this otherwise lease sperify the applicant's Residential votal Address is provide this otherwise lease sperify the applicant's Residential votal Address is provided this only if your street address is provided this only if your	Banned Person Please indicate whether or not the entity or people recorded on page one of this form are currently banned from amateur / recreational fishing by a NZ court		
f you are or have been a commercial sher, please specify your commercial lieful number Telephone Numbers It least one telephone number must be voivided Daytime telephone number Telephone Numbers It least one telephone number must be voivided Mobile Fax (if applicable) Email Your email address will never be used for my other purpose or provided to any other purpose or provided to any other purpose or provided to any other spanisation To help reduce our environmental impact we prefer to send Charter Vessel Operator sing communications electronically. If our would rather receive communications a letter, please tick the area indicated Postal Address I do not want to receive any listing-related communications by email Postal Address Fyour have a Registered Office Postal address, please provide this otherwise please specify the applicant's Residential oraal Address. Postal Address Postal Address Postal Address Postal Address Fyour have a Registered Office Postal address is liferent from your street address is liferent fr	D All Applicants must pro	vide the following communication d	etails
Telephone Numbers At least one telephone number must be rovided Cour email address will never be used for any other purpose or provided to any other purpose or pr	Commercial Client Number If you are or have been a commercial fisher, please specify your commercial client number	Commercial Client Number (if applicable)	
And least one telephone number must be provided Mobile		Please tick here if the following details are the would like to advise Fishserve of these changes	e same as your commercial details and you s.
Mobile Fax (if applicable) F		Daytime telephone number	After hours telephone number
Email four email address will never be used for any other purpose or provided to any other purpose of the purpose	At least one telephone number must be provided		
Address will never be used for any other purpose or provided to any other purpose of provided to an		Mobile	Fax (if applicable)
Email Website (if applicable) Fo help reduce our environmental impact we prefer to send Charter Vessel Operator isting communications electronically. If you would rather receive communications as a letter, please tick the area indicated Postal Address If you have a Registered Office Postal Address, please provide this otherwise blease specify the applicant's Residential Postal Address Physical Address			
represent to send Charter Vessel Operator isting communications electronically. If you would rather receive communications as a letter, please tick the area indicated Postal Address If you have a Registered Office Postal Address please provide this otherwise please specify the applicant's Residential Postal Address Postal Address Physical Address Physical Address Physical Address is liferent from your Postal address Physical Address Physical Address Physical Address Physical Address I do not want to receive any listing-related communications by email Postal Address Postal Address (number, street, suburb, city, postcode) Physical Address Physical Address Physical Address Physical Address	any other purpose or provided to any other organisation	Email	Website (if applicable)
I do not want to receive any listing-related communications by email Postal Address You have a Registered Office Postal Address, please provide this otherwise please specify the applicant's Residential Postal Address Physical Address	To help reduce our environmental impact we prefer to send Charter Vessel Operator		
Postal Address (number, street, suburb, city, postcode) Postal Address (number, street, suburb, city, postcode) Postal Address Post Code Physical Address Complete this only if your street address is different from your Postal address	listing communications electronically. If you would rather receive communications as a letter, please tick the area indicated	I do not want to receive any listing-related communication	ations by email
Physical Address Physical Address Complete this only if your street address is different from your Postal address Physical Address Physical Address Physical Address Physical Address	If you have a Registered Office Postal	Postal Address (number, street, suburb, city, postcode)	
Physical Address Complete this only if your street address is different from your Postal address	please specify the applicant's Residential Postal Address		
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Complete this only if your street address is Physical Address Ifferent from your Postal address			
	Physical Address Complete this only if your street address is different from your Postal address		

PART 2: Approved user details

Approved User may log on to the nateur Fishing Charter website to: Apply to list a vessel	First or given name(s)	Surname or family name			
Add or remove skipper / guides Add or remove contact people Update contact details Re-list as an Operator	Preferred name	Date of Birth			
ned Person se indicate whether or not this person currently banned from amateur / eational fishing by a NZ court	Banned Person Yes No				
All Approved Users m	nust provide the following commu	nication details			
te: If a telephone number, emain again but can simply tick the bo		ed for the Operator in Part 1, you don't need to			
se provide at least one telephone ber and an email address. If the field he same as that recorded in the rators listing details then simply place a in the box adjacent to the field	Daytime telephone number Mobile	After hours telephone number Email			
se provide a postal address. If this is same as the postal address recorded in Operators listing details then simply a tick in the box	Postal Address (number, street, suburb, city, postcode)	Post Code			
All Approved Users m	nust provide a security question as	s proof of identification			
a allow for a person who is approved by e operator to change registration details add vessels and to log on to the system.	Security question				
se enter a question and answer known to the approved user	Answer				

I, the approved user, have read and understood the "Collection of Personal Information" explanation at the end of this form

Signature Date

PART 3: Declaration

Have you used additional pages?

1
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Yes	

Total number of additional pages

All Applicants must provide the following declaration

Declaration

If you are listing as a company, please have at least two directors sign the declaration.

If you are listing as a trust please ensure all trustees sign the declaration.

If you are listing as a partnership, please ensure all partners sign the declaration.

If there are more signatories than space provided make further declarations on a copy of this page.

I declare that:

No

- The information I have given on this application is true and correct;
- I am authorised to provide this information and make this declaration;
- I am aware it is an offence to knowingly provide false or misleading information or omit any material information to obtain a benefit under the Fisheries Act 1996;
- I understand the applicant is required to notify Fishserve if there are any changes in the particulars I have provided in this application form;
- I have read and understood the "Collection of Personal Information" details supplied with this form;

Full Legal Name (Please PRINT)	Position	Signature	Date
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Notes

- To pay for this application via internet banking please deposit the fee to Ministry for Primary Industries 03-0049-0001709-03 and use your operator name as the reference.
- To pay for this application via credit card please contact us on 0800 422 843.
- Upon successful listing as an Amateur Fishing Charter Vessel Operator, you will be issued with an operator number. This number is unique and will be used to identify the Operator and all its dealings with Fishserve and the Ministry for Primary Industries. If the Operator is also a commercial operator and the commercial client number has been provided, then you may use this number for your dealings with Fishserve and the Ministry for Primary Industries.
- Approved Users will be emailed instructions on how to complete the listing process.
- Incomplete forms will be returned to the applicant and may result in a delay with the processing of the application.

Privacy Act 2020 - Collection of Personal Information

Your personal information is being collected to enable your application to be processed.

The agency collecting and holding this information is Fishserve (Commercial Fisheries Services Ltd), PO Box 482, Wellington, 6140.

The collection of this information is required under section 53(3) of the Fisheries (Amateur Fishing) Regulations 2013. It is not mandatory that you supply this information, but your application may not be processed if you do not provide all the information requested on this form.

You have the right to access and correct your personal information.

Fishserve Use (Only									
Application Fee		Receipt No _		_	ı	Data e	entry (completed	d//_	OFFICE USE ONLY
GST	\$	Initials _		_						
Amount	\$	Client number	1	-	1	1	-	1		DATE RECEIVED