Application form for permission to conduct research

Please supply the following information if you are applying for a permit to conduct research in a Commonwealth park or reserve, under Regulation 12.06(2) or 12.09(1) of the EPBC Regulations, and in accordance with subsection 354(1) of the EPBC Act.

This form should be used if you intend to conduct research within the grounds of the ANBG.

Obtaining plant material from ANBG requires a separate agreement. You will also be required to sign a copy of the permit conditions and an indemnity before a permit will be issued.

There is no fee for a research permit but if your proposed research incurs costs to ANBG you will be required to reimburse them. Further details about permits for research are available by calling the phone number shown above.

PART A – Details of applicant and proposed permit holder(s)

A1. Proposed permit holder(s)

Include the name of each individual or group (company, partnership or association) to whom the permit would be issued. In the case of a company, partnership or association, include:

• full names of all directors, partners or committee members;
• Australian Business Number or ACN;
• any business or trading name used in the conduct of the activity for which a permit is sought;
• whether any such business or trading name is registered;
• if so, the State/Territory of registration and registration numbers.

In the case of an individual(s), include the full name of each person to whom the permit is to be issued.

A2. Contact details

Include business address, postal address, telephone, fax and email of each proposed permit holder.

A3. Applicant (if different from proposed permit holder(s))

Include full name, address, postal address, telephone, fax and email.
A4. Relevant qualifications and experience of proposed permit holder(s)
If a proposed permit holder is an individual state their relevant qualifications and experience to carry out the activities.
If a proposed permit holder is a group (company, partnership or association), state the name and relevant qualifications and experience of all officers or employees of the group who will carry out the activities.

PART B – Description of the proposed research
B1. Briefly describe the research and its objective(s) or purpose(s)

B2. If the research involves observation of or any impact on a native species or its nest or dwelling place, you must provide the following details:
• Scientific name of species
• Common name of species (if named)
• Conservation Status under the EPBC Act (EW. Extinct in wild; CE. Critically endangered; EN. Endangered; VU. Vulnerable) (if listed under EPBC Act)
• Estimated number that will be affected
• Whether the research will result in the death or injury of a member of a native species
• Whether the research will involve taking, trading, keeping or moving a member of a native species
• Whether the research will result in damage to or destruction of the nest or dwelling place of a member of a native species
(Note that if the research involves collecting specimens, you will require a separate permit.)

B3. What are the likely short and long term impacts of the proposed activity on:
a. individual members of native species;
b. the population of which they form a part;
c. the species as a whole;
d. the ecological community?
e. non-native species

B4. Minimal impact
Describe what steps will be taken to ensure that all permit holders and other people authorised under this permit will comply with the EPBC Regulations, and what steps will be taken to minimise adverse impacts on any native species.

B5. If the research will affect listed species, describe how the activity will contribute significantly to the conservation of the relevant species.
A permit for research on listed species can only be issued if the activity will contribute significantly to the conservation of the species or community.
In your description, please indicate whether and how the proposed activity will implement the recommendations of any recovery plan or wildlife conservation plan in force for the species or ecological community.
Also indicate whether and how the proposed action responds directly or indirectly to recommendations of any national or international organisation responsible for management of the affected species.
Please note: Before a permit can be issued for activities affecting listed species or ecological communities, Environment Australia must seek comments from people who have registered their interest in commenting on permits (see Section 266A of the EPBC Act). For further details please contact Environment Australia at the address provided at the end of this application form.

**B6. Provide details if any of the following activities are intended: use of traps, nets, etc; bringing plants or animals into the Gardens.**

**B7. Ethics approval**
In cases where the activity involves invasive techniques, provide evidence that the proposed methods have been approved by an independent Animal Ethics Committee (this may include a State or Territory ethics committee, even if the activity is conducted in a Commonwealth area).

**B8. Previous permits**
Have you previously held a permit to conduct this activity in the Australian National Botanic Gardens? If so, please write the reference number from that permit and the date of expiry.

**B9. When is it proposed to commence the activity for which the permit is being sought? How often and for how long is the research activity to be taken?**
Include number of visits to ANBG anticipated during the permit period, and usual length of stay.

**B10. Other approvals or permits**
Provide details of any other approvals, permits or licences relating to this activity that you are applying for or have obtained, under Commonwealth, State or Territory legislation.

**B11. Detail any assistance or involvement expected from ANBG staff.**

**B12. Do you anticipate that there will be any cost to ANBG as a result of your research activities? Please detail.**

**B13. Outline why is it proposed to conduct this research within the Australian National Botanic Gardens rather than at other locations.**

**B14. List the reports and/or publications that are expected to follow from this research.**
Declaration
Please complete the application form, then read carefully and sign the following declaration.
I, ________________________________________________ (full name), the applicant for this permit, declare that the information contained in this application is correct to the best of my knowledge AND that none of the proposed permit holders have been convicted of, or is presently subject to proceedings for, an offence under:

a. the EPBC Act or Regulations, or
b. another law of the Commonwealth or a State or Territory about the protection, conservation or management of native species or communities, or
c. section 6 of the Crimes Act 1914 or sections 11.1. 11.4 or 11.5 of the Criminal Code in relation to an offence mentioned in a) or b) above, or
d. A provision of a law of a State or Territory that is equivalent to a provision mentioned in c) above.

If you can not make this declaration because a proposed permit holder has been convicted of, or is subject to proceedings for, a relevant type of offence please contact Peter Byron (02) 62509 500 for further advice. These matters do not exclude a permit being issued but can to taken into account.

Signature ________________________________________________

Date __________________________

Attachments

Please tick to indicate that you have included the following material with your application
____ Copy of the Permit Conditions and Indemnity signed, witnessed and dated.

Send this application to
The Director
Australian National Botanic Gardens
GPO Box 1777
Canberra ACT 2601
If the person completing this form is or is representing, a small business (ie. a business having less than 20 employees), please provide an estimate of the time taken to complete this form.
Please include:
• the time actually spent reading the instructions, working on the questions and obtaining the information; and
• the time spent by all employees in collecting and providing this information.
_______ Hours ________Minutes