Visitor Management

Permit to enter national park (scientific)

Nature Conservation (Protected Areas Management) Regulation 2017

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| **OFFICIAL USE ONLY**  DATE RECEIVED   |  |  |  | | --- | --- | --- | |  |  |  |   FILE REF   |  | | --- | |  |   PROJECT REF   |  | | --- | |  |   COMPLETE FORM  ENTERED BY [SIGNATURE]   |  | | --- | |  |   DATE   |  |  |  | | --- | --- | --- | |  |  |  |   **RECEIPTING DETAILS ONLY**  DATE RECEIPTED   |  |  |  | | --- | --- | --- | |  |  |  |   RECEIPT NUMBER   |  | | --- | |  |   AMOUNT RECEIVED   |  | | --- | | $ |   PROCESSED BY (INITIALS AND NAME)   |  | | --- | |  |   **GUIDE**   1. The applicant is the person or legal entity intending to carry out the activity and in whose name the relevant permits or licences are to be issued.   The registered address is legally required for the serving of notices.  It is the address of a person or entity and cannot be a post office box. | Important information for applicants | | | |
| Information requested in this form is required to enable your application to conduct an activity on QPWS managed areas to be processed. If you have any difficulties completing the form, please contact QPWS Park Access at: parkaccess@des.qld.gov.au  Your application must be assessed and a permit granted by the chief executive before you can proceed with the nominated activity.  Please read any information sheets and policies relevant to your application. Before submitting this application you should understand the requirements of legislation relevant to the proposed activity/ies i.e. the *Nature Conservation Act 1992*, and subordinate legislation.  **NOTE: YOU MUST ALLOW AT LEAST 40 BUSINESS DAYS PROCESSING TIME FOR THIS APPLICATION. SHOULD ADDITIONAL INFORMATION OR DOCUMENTATION BE REQUIRED, A FURTHER 20 BUSINESS DAYS MAY APPLY.** | | | |
|  | | | **Applicant details**  If acting on behalf of a legal entity please provide principal contact or person in charge details | |
|  | | | |  |  |  |  |  | | --- | --- | --- | --- | --- | | APPLICANT’S FULL NAME |  | TITLE | DATE OF BIRTH | | |  |  |  | | | | REGISTERED ADDRESS | | | | POST CODE |  |  |  |  |  | | --- | --- | --- | --- | |  |  |  | | | TELEPHONE | | FACSIMILE | | | MOBILE | | | | |  | | |  | | POSTAL ADDRESS (WRITE “AS ABOVE” IF THE SAME AS REGISTERED ADDRESS) | | | POST CODE | | IS YOUR PREFERRED CONTACT METHOD BY MAIL OR E-MAIL?  Mail  E-Mail (list address) | | | | | |
|  | |  | Tick relevant boxes below if the applicant(s) are:  an individual or sole trader  a company  a local government  the state of Queensland acting through a government department  a body corporate  an incorporated association  other (please provide details) | |
| 1. Registered legal entity details | |  | **Registered legal entity details**  If acting on behalf of a legal entity please provide details of the legal entity. | |
| The applicant is the registered legal entity (not a business trading name) intending to carry out the activity and in whose name the relevant permits or licences are to be issued.  The registered address is legally required for the serving of notices. It is the registered business address of the company making the application and cannot be a post office box.  Enter the Australian Company Number (ACN) or Australian Business Number (ABN) of the incorporated company or the Association Number (AN) of the incorporated association; or the title and section of the legislation that gives the statutory corporation its legal status.  The ACN or ABN must be provided for applications lodged under the Nature Conservation Act 1992 or Recreation Areas Management Act 2006. | |  | |  |  |  |  |  | | --- | --- | --- | --- | --- | | REGISTERED LEGAL ENTITY NAME | | | | | |  | |  |  | | | TRADING NAME (IF APPLICABLE) | | | | | |  |  | |  | | | REGISTERED ADDRESS | | | | POST CODE | |  |  | |  | | | TELEPHONE | FASCIMILE | | MOBILE | | | E-MAIL ADDRESS | | | | | |  |  | |  | | | POSTAL ADDRESS (WRITE “AS ABOVE” IF THE SAME AS REGISTERED ADDRESS) | | | | POST CODE | |  | |  |  | | | ACN/ABN/AN OR TITLE AND SECTION OF LEGISLATION | | | | | | |

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| 1. Authorised signatory   Do not sign here. The signature block is on page 8. |  | **Authorised signatory**  The authorised signatory is the person authorised to sign an application on behalf of a corporation and in doing so declares that the corporation will be bound by the conditions associated with the granting of the permit.   |  |  |  | | --- | --- | --- | | AUTHORISED SIGNATORY FULL NAME | | TITLE | |  |  |  | | POSITION IN CORPORATION | | |  |  |  |  |  |  | | --- | --- | --- | --- | --- | | TELEPHONE | | FASCIMILE | | | | MOBILE | | | | | | E-MAIL ADDRESS | | | | | |  |  | |  | | | POSTAL ADDRESS (WRITE “AS ABOVE” IF THE SAME AS REGISTERED ADDRESS) | | | | POST CODE | |

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| 1. Contact person |  | **Contact person (if different from signatory)**  Should we require further information regarding this application, please provide a contact person with authority to respond on behalf of the legal entity.   |  | | --- | | FULL NAME | |  | | TELEPHONE | |
| 1. Project details   Applications should be submitted at least 40 business days prior to the start of the activity to allow processing and assessment time.  It is recommended that you discuss your proposed activity with QPWS regional staff prior to lodging your application. The dates you intend to be on the nominated area and the duration of the permit.  Select the activity that best describes your proposal. |  | **Project details**   1. **Pre-lodgement meeting**   If you have attended a pre-lodgement meeting or discussed your proposal previously with the Department, provide details here.   |  | | --- | | QPWS OFFICER NAME AND DATE OF MEETING |  1. **Previous permit details**   Have you previously held a similar permit for this type of activity?   |  |  | | --- | --- | | Yes (provide details) Permit Number | No |  1. **Specify the term of the proposed permit (maximum term 3 years)**  |  |  | | --- | --- | | DATE FROM | DATE TO (INCLUSIVE) | |  |  | |
| If you require more space, please attach a separate sheet |  | One year  Two years  Three years   1. **Describe your proposed activity:**  |  | | --- | |  | |

1. **Frequency of activities**

**Daily**  **Weekly**  **Monthly**  **Other**

If “other”, please specify number of visits per day and days of the week

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1. **Details of nominated areas and participants**

Please give details of the area/s in which the activity is to take place and number of participants who will visit these areas. If your application includes roads or watercourses, please attach a map of the proposed route. Lodging an application without the sufficient information may delay the assessment of your application.

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| --- | --- | --- | --- | --- |
| PARK NAME | SITES / ROADS | NUMBER OF PARTICIPANTS | TIME OF ARRIVAL | TIME OF DEPARTURE |
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1. **Vehicle, vessel, tent, structures and equipment details**

List style and size of vehicles / vessels / structures and equipment to be used in conjunction with activity.

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| --- | --- | --- | --- |
| ACTIVITY DATE | VEHICLE ACCESS REQURIED  YES / NO | VEHICLE / VESSEL / AIRCRAFT / STRUCTURE TYPES  EG 4WD / COACH / MT BIKES / TENTS / MARQUEE ETC | NO. OF VEHICLES / VESSELS INVOLVED |
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1. Applicant suitability

A permit may be issued only if the applicant is considered a suitable person as prescribed under either or both section 53(3) of the *Recreation Areas Management Act 2006* and the *Nature Conservation (Protected Areas Management) Regulation* *2017* as relevant to the application.

**In the last 3 years have you or an associatea:**

Please provide any relevant details in the box below

|  |  |
| --- | --- |
| **a)** held or been a party to any of the following permits or authorities which has been suspended or cancelled:   * a commercial activity agreement or similar agreement in Queensland or another state or country * a protected area authority**b** (including a commercial activity permit) * a wildlife authority * a similar or relevant authority in another state or country | Yes  No |
| **b)** accumulated 10 or more demerit points under either of the following:   * *Nature Conservation Act 1992* * *Recreation Areas Management Act 2006* | Yes  No |
| **c)** been convicted of an offence against any of the following:   * *Nature Conservation Act 1992* * *Recreation Areas Management Act 2006* * *Forestry Act 1959* * *Marine Parks Act 2004* * *Animal Care and Protection Act 2001* * an offence relating to wildlife under another Act * an equivalent offence in another State or country? | Yes  No |
| **DETAILS** | |
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**a*associate***, of a person who is being considered as suitable or not suitable to hold a relevant authority, means—

(a) if the person being considered is a corporation—each executive officer of the corporation; or

(b) if the person being considered is an individual—another person who—

(i) is, or will be, regularly or usually in charge of the individual’s activity or business, or proposed activity or business, that relates, or will relate, to the authority; or

(ii) regularly directs staff of the activity or business in their duties; or

(iii) is, or will be, in a position to control or substantially influence the activity or business, or proposed activity or business.

**b *a protected area authority*** includes a permit to take, use, keep or interfere with cultural or natural resources, an apiary permit, an aboriginal tradition authority, an Island custom authority, camping permit, restricted access area permit, stock grazing permit, stock mustering permit, travelling stock permit, permit to enter a national park (scientific), commercial activity permit, permit to solicit donations or information, organised event permit, permit to use recreational craft or special activity permit.

1. Application assessment additional information

**Please attach a statement including any additional information not already provided that will assist in assessing your application. Your application will be assessed against a range of matters required by the relevant legislation including the following.**

**For activities in protected areas (for example, national parks):**

* the chief executive cannot grant an activity permit for a protected area that is inconsistent with the management principles for the area; or the interim or declared management intent, or management plan, for the area.
* the impact the activities that may be carried out under the authority may have on the conservation of the cultural or natural resources of a protected area or native wildlife.
* The effect the grant of the authority will have on the fair and equitable access to nature, having regards to, in particular, the ecologically sustainable use of protected areas or wildlife.
* any contribution the applicant proposes to make to the conservation of nature.
* any relevant Australian or international code, instrument, protocol or standard or any relevant intergovernmental agreement.
* the precautionary principle, public health and safety and the public interest.
* whether the applicant is a suitable person to hold the authority.
* any recovery plan for wildlife to which the authority applies.
* any other matter stated in a management instrument as a matter the chief executive must have regard to when considering an application for the authority.
* for an application for a relevant authority for an Aboriginal land protected area – the indigenous management agreement for the protected area.
* for an application for a relevant authority for a protected area, other than an Aboriginal land protected area, in the Cape York Peninsular Region – any indigenous land use agreement for the area
* the impact the activities that may have on the character and amenity of the area and adjacent areas.
* the likely cumulative effect of the proposed use and other uses on the area.
* the orderly and proper management of the area.
* anything else the chief executive considers appropriate to achieve the object of the Act.
* For further information please refer to the *Nature Conservation (Protected Areas Management) Regulation 2017.*

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| 1. **Privacy** **statement**   The Department of Environment and Science is collecting the information on this form to assess your application for a permit. This information is required under the *Nature Conservation Act 1992,* the *Recreation Areas Management Act 2006*, the *Forestry Act 1959* and the *Marine Parks Act 2004*.  The Department may have entered into an indigenous management agreement relating to this managed area/s or the area may be subject to joint management.  If so, the completed application form and relevant supporting documentation may be disclosed to the relevant indigenous organisation/s (including to any relevant Native Title Body Corporates) for the purpose of the Department consulting with or seeking the consent of that organisation (on the basis that your information may only be used for that purpose and is not to be disclosed to any other person).  Your personal information will not be otherwise disclosed to any other parties without your consent unless authorised or required by law, such as under the *Right to Information Act 2009* or the *Evidence Act 1977*.  Further information about privacy is available on the Department’s website:  [http://www.des.qld.gov.au/legal/privacy.html](http://www.npsr.qld.gov.au/legal/privacy.html)   1. **Applicant’s certification**   ***Note****: If you have not told the truth or attempted to be misleading in this application, you may be liable for prosecution under the relevant Acts or Regulations.*  I have read and understand the public liability, indemnity, release and discharge requirements of the Department and I agree to comply with and be bound by these conditions.  I do solemnly and sincerely declare that the information provided is true and correct to the best of my knowledge and I make this solemn declaration conscientiously believing the same to be true and by virtue of the provisions of the *Oaths Act 1867*.  I understand that information supplied on or with this application form may be disclosed publicly in accordance with the *Right to Information Act 2009* and the *Evidence Act 1977*.   |  | | --- | | APPLICANT’S SIGNATURE |  |  | | --- | | DATE | |
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**PLEASE NOTE THE FOLLOWING:**

* **Insurance Requirements –** If this application is approved you may be required to hold public liability insurance and indemnify and release the Department of Environment and Science. Please refer to relevant departmental information available at **www.des.qld.gov.au** concerning public liability insurance and indemnity requirements for QPWS authorities.
* **Processing Time –** The legislation under which your application has been made provides for the amount of time by which the department must make a decision on your application.  This time frame may vary depending on whether the department requires further information from you to properly consider your application and the time it takes you to provide the requested information back to the department.  Most applications however do not require further information, in which case, 40 business days is the statutory period allowed for the decision to be made.  Accordingly, whilst the department will endeavour to decide your application efficiently it does not guarantee that your application will be decided more quickly than the statutory period allows

**Please complete the following checklist.**

Application form(s) signed and completed

Supporting information attached (e.g. maps)

Read Operational Policy - Insurance and indemnity requirements for QPWS authorities

Provided additional information to support application.

Please return your completed application to:

**Queensland Parks and Wildlife Service**

**Assessments and Approvals, Park Access Team**

Department of Environment and Science

PO Box 15187

City East QLD 4002

**Enquiries:**

Email: parkaccess@des.qld.gov.au

Website: www.des.qld.gov.au