

# Application form

Nature Conservation Act 1992 – Nature Conservation (Wildlife Management) Regulation 2006  
and Nature Conservation (Administration) Regulation 2006

## Application for Commercial Wildlife Licence (Macropod) – Dealer

- Note:**
1. Applicants must be 18 years or older.
  2. The Department of Environment and Resource Management (DERM)/State of Queensland takes no responsibility for the action of the holder of a licence, permit or other authority granted under the *Nature Conservation Act 1992*.
  3. Refer to current harvest period pricelist for relevant prices.

**Species to be kept or used:** eastern grey kangaroo (*Macropus giganteus*), red kangaroo (*Macropus rufus*), wallaroo (*Macropus robustus*).

**Privacy Statement:** information on this form is being collected to assess your application for a Commercial Wildlife Licence under the *Nature Conservation Act 1992* for the species defined above. In determining your application, some of this information may be given to the Commissioner of Police under the *Nature Conservation Act*, Section 135. Your details will not be disclosed outside the department unless you have given us permission or we are required by law.

### AN INDIVIDUAL OR A CORPORATION MAY APPLY FOR THIS LICENCE

1. Is this licence application for a:  Dealer site  Meat processing works  Tannery

2. Address or precise location (including lot number or GPS position) where activities under this licence are to be conducted:

Site address or description of location. If the site is on a property, also give the distance and direction from nearest homestead (name the homestead).

Town	Postcode

Shire	If the site is on a property, give names of some adjoining properties
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3. Commercial (Macropod) Wildlife Licence previous site number (if applicable):

4. What licence term do you require? Refer to current price list to determine application fee.  1 Year  3 Years

5. Applicant's details: (if the applicant is a corporation, this part must be completed by a person on the board of directors or a person authorised to make licence applications on behalf of the corporation)

Title: Mr/Mrs/Ms/Other	Family name	Given names	Date of birth
/	/	/	/ /

Residential address

Postcode	

Telephone (business hours)

( )
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Postal address for correspondence

Postcode	

Telephone (after hours)

( )
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Fax number (if applicable)

( )
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**6. Is this licence to be issued in the name of a corporation?**

NO  go to 8

YES  if yes, give details of your position in the corporation and the name, address and registration number (ACN).

Corporation name

Applicant's position in corporation

Corporation street address—if same as residential, write 'as above'

  


Postcode

Telephone (business hours)

Fax number (if applicable)

Corporation postal address—if same as street address, write 'as above'

  


Postcode

ABN/ACN

**7. Person in charge of site (Site Manager)?**

Are you the person nominated by the corporation to be the person in charge of the premises where the corporation is to conduct activities under this licence?

No  STOP. The person completing this section must be the person in charge of the site.

Yes  Please complete the details below (before submitting this form).

Title: Mr/Mrs/Ms/Other

Family name

Given names

Date of birth

 /  / 

Residential address

  


Postcode

Telephone (business hours)

Telephone (after hours)

Postal address for business correspondence

  


Postcode

Fax number (if applicable)

Signature of person in charge of site

Date

Your position in the corporation

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8. **Convictions:** during the past 3 years, have you or a person who will have effective management or control of the operations for which this application is made, ever been convicted of: (a) an offence against the *Nature Conservation Act 1992*; or (b) an animal welfare offence under the *Animal Care and Protection Act 2001* or an offence relating to wildlife against another Act; or an offence, however described, equivalent to an offence mentioned under (a) or (b) in another state or country?

YES  Give Full Details

NO

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**Note:** A conviction includes a plea of guilty or a finding of guilt by a court even though a conviction is not recorded.

9. **Declaration:** I do solemnly and sincerely declare that the information provided is true and correct to the best of my knowledge.

Note: the provision of false or misleading information may result in action being taken under the relevant Acts or regulations.

**Applicant's full name** (authorised person, or executive authorised on behalf of corporation)

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**Applicant's signature**

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**Date**

/ /
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Credit Card Details													
Number on card													
Name on card									Expiry date				
Signature									Mastercard / Visa <i>(please circle one)</i>				
Phone Number							Amount to be charged	\$					

**Please return your completed form to:**  
 Department of Environment and Resource Management  
 Macropod Management Unit  
 PO Box 224  
 CHARLEVILLE QLD 4470  
 Phone: (07) 4654 4276  
 Fax: (07) 4654 1418  
[www.derm.qld.gov.au](http://www.derm.qld.gov.au)

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Processing Officer's Name			Date Processed	/ /
Serial numbers of books issued				
Receipt Number		Receipt Date	/ /	Receipt Amount \$
			Rec Officer Initials	