# Permit to Collect Native Plant Material – Threatened Species (Class D)

## Legislation

*National Parks and Wildlife Act 1972* (section 49)

*National Parks and Wildlife (Wildlife) Regulations 2019*

## Overview

The Department for Environment and Water (DEW) is responsible for regulating the collection and use of native plant material from Public Land.

## Permit description

This permit entitles the holder to collect Threatened native plant material, in a sustainable manner, for commercial activities:

(a) endangered, vulnerable or rare species referred to in Schedule 7, 8 or 9 of the *National Parks and Wildlife Act 1972*; or

(b) species or ecological communities listed as threatened under Commonwealth legislation.

## How do I apply for a permit?

You will need to follow these steps:

1. Provide all information requested in this application form.
2. Ensure the application declaration is signed and dated.
3. Email the completed form to [DEWfaunapermitsunit@sa.gov.au](mailto:DEWfaunapermitsunit@sa.gov.au) or post it to:   
   Fauna Permits Unit,   
   GPO Box 1782   
   Adelaide SA 5001   
   or lodge it in person at one of our offices:

* Adelaide: Ground Floor, 81-95 Waymouth Street
* Mount Gambier: 11 Helen Street
* Port Augusta: SGIC Building, 9 Mackay Street
* Berri: 28 Vaughan Terrace
* Port Lincoln: 86 Tasman Terrace

## Fees

A permit fee of $104.00 is payable.

Payment can be made via post or in person by Credit Card, Cheque or Money Order (made payable to the Department for Environment and Water).

## Do I need to keep records?

Yes. You must submit an annual return 14 days after the expiry of your permit. The return form will be provided upon the granting of a permit.

Further permits may not be granted unless the completed return is submitted.

## How long does a permit last?

Permits expire 30 June

## Can the permit be transferred?

No. A permit is not transferable.

## Lodging an application

It is important to note the following when lodging an application:

* Lodging an application does not guarantee approval of this permit. You will be contacted if further information is required to complete the assessment.
* You must meet certain criteria before being a permit.
* Please allow sufficient time for your application to be assessed. Assessment and approval of this application may take up to four (4) weeks.
* Please note collection is not permitted within any National Parks and Wildlife conservations park or reserve, if for any reason you wish to collect off Park you must provide written permission form the District Ranger responsible for the Park or Reserve in question.

## Application for a Permit to Collect Native Plant Material - Threatened Species (Class D)

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| Part 1: General information | | | | | | | | | | |
| Your personal details | | | | | | | | | | |
| Title | First name | | | Surname | | | | | | Date of birth |
|  |  | | |  | | | | | |  |
| Business name | | | | | | | | | | |
|  | | | | | | | | | | |
| Location of main business premises | | | | | | | | | | |
| Street No. | Street name | | | City/suburb/town/locality | | | | | | Post code |
|  |  | | |  | | | | | |  |
| Business mailing address | | | | | | | | | | |
| E.g. Post Office Box | | | | City/suburb/town | | | | | | Post code |
|  | | | |  | | | | | |  |
| Residential address | | | | | | | | | | |
| Street No. | Street name | | | City/suburb/town/locality | | | | | | Post code |
|  |  | | |  | | | | | |  |
| Your mailing address | | | | | | | | | | |
|  as above | | | | | | | | | | |
| eg. Post Office Box | | | | City/suburb/town | | | | | | Post code |
|  | | | |  | | | | | |  |
| Your contact details | | | | | | | | | | |
| Telephone number | | Mobile number | | | Email | | | | | |
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| Did you hold a seed collection permit last year? | | | | | | | | | | |
| * Yes, please provide your previous permit number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   Please ensure your annual return summary has been submitted | | | | | | | | | | |
| * No, first time applicant | | | | | | | | | | |
| Details of collector(s) to be included in the permit | | | | | | | | | | |
| Please provide the name, address and date of birth of each collector to be included on the permit (attach additional pages to the application if more space is required): | | | | | | | | | | |
| **Person 1:**  Full name:  Residential Address:  Date of Birth:  Experience with identification and collection of native plant species: | | | | | | | | | | |
| **Person 2:**  Full name:  Residential Address:  Date of Birth:  Experience with identification and collection of native plant species: | | | | | | | | | | |
| **Person 3:**  Full name:  Residential Address:  Date of Birth:  Experience with identification and collection of native plant species: | | | | | | | | | | |
| **Person 4:**  Full name:  Residential Address:  Date of Birth:  Experience with identification and collection of native plant species: | | | | | | | | | | |
| **Person 5:**  Full name:  Residential Address:  Date of Birth:  Experience with identification and collection of native plant species: | | | | | | | | | | |
| Prior convictions | | | | | | | | | | |
| Have you ever been convicted of an offence against the *National Parks and Wildlife Act 1972*, the *Animal Welfare Act 1985*, South Australian Firearms Legislation or equivalent interstate legislation? If yes, please provide details below | | | | | | | | |  Yes   No | |
| Description of offence | | | | | | | Year | | State/Territory | |
|  | | | | | | |  | |  | |
| Declaration by applicant | | | | | | | | | | |
| * I declare that the information stated within this application is true and correct * I understand that this permit is not transferable * I acknowledge that the information I have provided may be used in accordance with the Government of South Australia’s Information Privacy Principles Instruction * I have read and understand the outline of responsibilities below * I understand this application must be supported by my parent or guardian, if I am under 18 years of age   **Our responsibilities**   * The information required on this form is collected under the *National Parks and Wildlife Act 1972*. We collect this information to determine your eligibility for a permit, to issue the related permit and for compliance activities. Your personal information will not be disclosed to a third party except in accordance with the ‘Information Privacy Principles’. Information held by the department may be used by law enforcement agencies, as well as other uses provided for by law. Such access for approved purposes may be granted to other government agencies. When you complete this application form, understand that you have consented to the release of information provided by you, to other agencies for compliance and enforcement purposes. | | | | | | | | | | |
| **Signature of applicant** | | | | | | **Date** | | | | |
|  | | | | | |  | | | | |
| **Method of Payment** | | | | | | | | | | |
| Please nominate your preferred method of payment of **$104.00** | | | | | | | | | | |
| Cheque/Money Order\*  \*Please make payable to the Department for  Environment and Water and attach to this application form | | | Cash \* \* Cash payments can only be made in person at a local DEW office. | | | | |  Credit Card\*  \* A Fauna Permits Officer will contact you upon receipt of your application to obtain card details | | |

### Part 2A: Criteria to be met (prior to a decision on the granting of a permit)

Please demonstrate how you meet the following application criteria (please attach additional pages if required):

* Relevant training and experience in the collection and use of native plant material
* The purpose for collection and intended use once collected
* Additional information in support of your application
* Completed details of proposed collection activities sheet (attached)
* Please attach references in writing from 2 people who can attest to your suitability with regards to this application. Referees should have demonstrable and extensive botanical knowledge.

## Details of proposed collection activities (attach additional pages if required)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **SPECIES OF PLANT**  ***(Botanical Name*)** | **COUNCIL** | **LOCATION**  (applicants must provide a map or GPS coordinates clearly identifying the potential location(s) and population(s) that will be harvested) | **PARTS TO BE TAKEN**  (leaves, flowers, fruits, seeds, rhizomes, tubers, bulbs) | **QUANTITY**  (Number, grams or kilograms) |
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