



## Applicant Information Form 12b Holding, taking, importing, exporting marine mammals for non-research purposes

The Department recommends that you contact us to discuss the proposed activity prior to completing the application forms:

Permissions Advisor (Support)

Phone: +64 3 371 3700

Email: [permissionschristchurch@doc.govt.nz](mailto:permissionschristchurch@doc.govt.nz)

This form must be completed when applying for permits to hold, take, import, export marine mammals for non-research purposes ONLY. If you wish to hold, take, import, export marine mammals for research purposes please fill in [Form 12a](#), available on the DOC website.

Please provide all information requested in as much detail as possible. Applicants will be advised if further information is required before this application can be processed by the Department.

Please note that the application process involves notification in the *Gazette* for 28 days (see s.5.5 of the Act), allow sufficient time when submitting the application for this to be undertaken.

Once you have filled in your application form, please complete this checklist to ensure that all components of your application are complete. This will help prevent any possible delays in the processing of your application.

- Legal status (company/trust/inc society) registration number (if not an individual)
- Written consultations (if applicable)
- Have you read and accept the section regarding the liability of the applicant for payment of fees
- Have you signed your application?**

**All efforts in putting together a detailed application are greatly appreciated and will allow the Department to effectively and efficiently process your application.**

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## A. Applicant Details

**Applicant Name**  
(full name of registered company or individual, student or university) The Chatham Islands Museum & Cultural Heritage Charitable Trust

**Legal Status of applicant (tick)** Individual Registered Company Trust  Incorporated Society

**Other (please specify full details)**

Please supply the company, trust or incorporated society registration number: Charitable Trust 2542261

If an individual please supply your date of birth (this is a unique identifier for you):

**Trading Name**  
(if different from Applicant name)

**Postal Address (of Applicant)** PO Box 40, Chatham Islands 8942

**Street Address (if different from Postal Address)** 9 Tuku Road, Waitangi, Chatham Island

**Phone** 03 3050033 Ext 3 **Website** www.chathamislandsmuseum.nz

**Contact Person and role** Dr Jocelyn Powell – Co-Chair

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## B. Details of Proposed Activity

Take  Hold  Import  Export

**NB** please tick all applicable activities

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## C. Purpose of Proposed Activity

- Hold a taxidermied seal pup
- hold any existing acquisitions
- hold future acquisitions

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- Description of activity

DOC office on Chatham Island has offered a dead (frozen) baby fur seal to be taxidermied and displayed in the new museum being built over the next 12 months. The fur seal will remain the property of DOC but on permanent loan to The Chatham islands Museum & Cultural Heritage Charitable Trust.

- Species of marine mammal item/part (if known):

Fur seal (baby) – *Arctocephalus forsteri*

- Type of marine mammal item/part (eg tooth):

Whole baby fur seal

- Number of marine mammal items/parts:

2

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- How was the marine mammal item/part obtained:

Found by DOC staff or handed to DOC by residents or visitors to the Chatham Islands