



# APPLICATION FOR APPROVAL OF A TRANSITIONAL OR CONTAINMENT FACILITY &/OR OPERATOR

## GUIDANCE NOTES

**Read these Guidance Notes before completing your Application**

*Please keep these notes. Detach prior to sending the rest of the application to MAF.*

This application form is to be used for the purposes of applying for approval, **(a)** for a transitional facility and/or containment facility, and/or **(b)** as an Operator, under the Biosecurity Act 1993.

**Transitional facilities** are places approved for inspection, storage, treatment, quarantine, holding, or destruction of uncleared goods or parts of a port declared as such (under the Biosecurity Act 1993). Such uncleared goods include imported goods such as food products, items made from wood or plant material, sea containers, used machinery or vehicles, and other goods defined as risk goods under the Biosecurity Act 1993.

**Containment facilities** are places approved for holding organisms (plants and animals) that should not, whether for the time being or ever, become established in New Zealand. This includes all organisms defined as “new organisms” under the Hazardous Substances and New Organisms Act 1996.

Transitional and Containment facilities are approved as such to one or more operational (facility) standards which specify the operational and structural requirements to be met for the holding and management of organisms and uncleared goods.

**IMPORTANT: Please ensure you have read and understood the relevant Facility Standard(s) prior to applying for approval.**

Facility standards can be found online at: <http://www.biosecurity.govt.nz/regs/trans/stds>

<i>Who can apply for a Transitional/Containment Facility approval?</i>	Any person <sup>1</sup> may apply for approval of a transitional or containment facility, or to become the Operator of a transitional or containment facility. In most cases this will be an importer or an agent.
<i>Who needs to fill out this application?</i>	Any individual may fill out this application as long as they are able to provide the relevant information required and can declare that, to the best of their knowledge, that information is true and correct.  <b>NB:</b> Since the individual who signs the application is also agreeing to be liable for costs associated with application processing, this individual should be the business manager or someone with the delegated financial authority.
<i>What documentation must accompany this application?</i>	<ol style="list-style-type: none"> <li>1. If requesting approval of a new facility (and therefore a new Operator), the following documentation must be supplied: <ul style="list-style-type: none"> <li>▪ This application form</li> <li>▪ A draft of the <b>facility operating manual</b> (not required for Plant Quarantine level I &amp; II facilities)</li> <li>▪ An application for a <b>MAF credit account</b> (if one is not already in place), otherwise quote your current account number with your application</li> <li>▪ A completed <b>Consent to Disclosure of Information</b> (Police check form) for the Operator (if the applicant is an individual) OR for the nominated Manager (if the applicant is <u>not</u> an individual<sup>1</sup>) where required by the standard</li> <li>▪ Evidence the Operator has taken training (required under BNZ-STD-TFGEN only)</li> </ul> </li> <li>2. If requesting approval of a new Operator at an existing facility OR approval to additional facility standard(s), the following documentation must be supplied: <ul style="list-style-type: none"> <li>▪ This application form</li> <li>▪ A revised version of the <b>facility operating manual</b> (incorporating any additional facility standard requirements/new Operator details - not required</li> </ul> </li> </ol>

<sup>1</sup> Under the Biosecurity Act 1993, “person” includes the Crown, a corporation sole, and a body of persons (whether corporate or unincorporated).

	<p>for Plant Quarantine level I &amp; II facilities)</p> <ul style="list-style-type: none"> <li>▪ A completed <b>Consent to Disclosure of Information</b> (Police check form) for the new Operator (if the applicant is an individual) OR for the nominated Manager (if the applicant is <u>not</u> an individual<sup>1</sup>) where required by the standard</li> <li>▪ Evidence that the Operator has taken the required training (required under BNZ-STD-TFGEN only)</li> </ul>
<i>How long will it take to process this application?</i>	<p>An application can take up to <b>six weeks</b> to process from the time that MAF receives all correct and complete documentation. Most delays are due to documentation errors and insufficient facility operating manual. In order to reduce delays make sure your operating manual includes all necessary requirements and that you submit all required documents.</p> <p>For general transitional facilities, template operating manuals are available on the MAF website.</p>
<i>What are the costs?</i>	<p>Costs are based on the current Biosecurity (Costs) Regulations and are for the time involved in processing applications, reviewing the facility operating manual and any site inspection by an Inspector. The level of cost will vary depending on whether the application is for a new or existing facility and/ or Operator.</p> <p>Costs are charged in 15 minute allotments, at a rate of \$102.20 per hour.</p> <p>There are also ongoing costs associated with an approval, e.g. costs for facility audits (includes Inspector's travel time) as well as an annual fee of \$163.55.</p>
<i>Where do I send my application documents?</i>	<p>Send applications to:</p> <p>MAF Facility Approvals                      Email: <a href="mailto:facilityapprovals@maf.govt.nz">facilityapprovals@maf.govt.nz</a>  PO Box 53066                                      Fax: 09 909 8558  Auckland Airport, Auckland 2150</p> <p>For General Inquiries relating to this application phone: 09 909 3030 (Option 5)</p>
<i>How long is an approval valid for?</i>	<p>Approvals are valid for as long as the facility continues operating in accordance with its approval under the relevant standard(s). This is assessed via an inspection from MAF. Approvals may cease when:</p> <ol style="list-style-type: none"> <li>1. The Operator requests cancellation, or</li> <li>2. MAF cancels the approval, in accord with section 39 (facility cancellation) and/or section 40 (Operator cancellation) of the Biosecurity Act 1993.</li> </ol>
<i>Privacy statement and disclosure of information</i>	<p>All information collected in this application form is for the purpose of applying for approval under sections 39 and 40 of the Biosecurity Act 1993, and will not be passed on to third parties without the consent of signatories.</p> <p>Under the Privacy Act 1993, signatories have the right of access to, and correction of, any personal information that is held by MAF.</p> <p>All relevant questions in this form must be answered. Failure to do so may result in delays in processing applications.</p>

<b>For Your Record</b> Date Application sent to MAF:	
	DAY / MONTH / YEAR

**Please keep these notes. Detach prior to sending the rest of the application to MAF.**



## APPLICATION FOR APPROVAL OF A TRANSITIONAL OR CONTAINMENT FACILITY &/OR OPERATOR APPLICATION FORM

If filling in by hand, please use blue or black ink pen. Print in **BLOCK CAPITAL LETTERS**. Cross out any errors.

SECTION A: NATURE OF THIS APPLICATION <i>(please tick one)</i>
<input type="checkbox"/> This is an application for a new facility and Operator approval (includes current facilities moving locations) → <i>Go to Section B</i>
<input type="checkbox"/> This is an application for a new Operator approval at an existing facility Provide your current MAF facility approval code* <i>What is this?</i> : _____ → <i>Go to Section B</i>
<input type="checkbox"/> This is an application for approval to additional/ new MAF facility standard(s) at a current facility Provide your current MAF facility approval code* <i>What is this?</i> : _____ → <i>Go to Question 9</i>
* <b>What is this?</b> Your facility registration code is the <b>4 or 5 number code</b> found on your current facility approval certificate.

SECTION B: NEW FACILITY/OPERATOR APPROVAL OR NEW OPERATOR APPROVAL
1. Is the new Operator an individual? <input type="checkbox"/> Yes → <i>Go to Question 2</i> <i>NB: MAF will hold this person responsible for maintaining biosecurity requirements at the business.</i> <input type="checkbox"/> No → <i>Go to Question 5</i>
2. Name of new Operator:            Mr/Mrs/Miss/Ms/Dr _____ <div style="display: flex; justify-content: space-between; width: 100%;"> <span>(First Name)</span> <span>(Surname)</span> </div>
3. Operator's email: _____
4. Position in the organisation/company: _____ → <i>Go to Question 8</i>
5. Name of Nominated Manager: Mr/Mrs/Miss/Ms/Dr _____ <div style="display: flex; justify-content: space-between; width: 100%;"> <span>(First Name)</span> <span>(Surname)</span> </div>
6. Nominated Manager's email: _____
7. Position in the organisation/company: _____
8. If you are applying for approval under BNZ-STD-TFGEN, has the Operator/Nominated Manager taken the required training? <input type="checkbox"/> Yes <i>Provide your Operator number &amp; training expiry date:</i> _____ <input type="checkbox"/> No <i>Please ensure you are booked on a training course &amp; provide confirmation of booking with this application, e.g., attached emails or letters of confirmation. For trainer contact details see: <a href="http://www.biosecurity.govt.nz/regs/trans/req#training-providers">http://www.biosecurity.govt.nz/regs/trans/req#training-providers</a></i>
9. Business owners name (if different from Operator):            Mr/Mrs/Miss/Ms/Dr _____ <div style="display: flex; justify-content: space-between; width: 100%;"> <span>(First Name)</span> <span>(Surname)</span> </div>
10. Business owner's email: _____
11. Current Operator's name (if applicable):            Mr/Mrs/Miss/Ms/Dr _____ <div style="display: flex; justify-content: space-between; width: 100%;"> <span>(First Name)</span> <span>(Surname)</span> </div>
<b>NOTE:</b> A new Operator must also fill out the Consent to Disclosure of Information (Police Check) form, downloadable at: <a href="http://www.biosecurity.govt.nz/border/transitional-facilities/registration/application-form">http://www.biosecurity.govt.nz/border/transitional-facilities/registration/application-form</a>

→ *Go to Section C*



**SECTION C: APPROVAL TO MAF FACILITY STANDARD(S)** *(for new & existing facilities)*  
*You must have read & understood the requirements of the relevant MAF standard(s)*

12. Is your facility currently approved?  Yes → *Go to Question 13*  
 No → *Go to Question 15*

13. What standard(s) is the facility currently approved to? \_\_\_\_\_

14. Do you wish to request cancellation of approval to any of the standards listed in 13 above?  Yes *Indicate which standard(s):* \_\_\_\_\_  
 \_\_\_\_\_ → *Go to Question 15*  
 No → *Go to Question 15*

15. Are you requesting a new approval or change of current approval to BNZ-STD-TFGEN in order to import **general risk goods** (see lists below)?  Yes *Tick one or more categories from the lists below.*  
 No → *Go to Question 17*

<p><u>Specific types of facilities (see annexes in the standard's guidance document)</u></p> <p><input type="checkbox"/> Sea containers (<b>Annex A</b>)          What is the estimated number of containers per year?          _____          What is the origin of containers (top 3 countries)?          _____</p> <p><input type="checkbox"/> Decontamination Facility (<b>Annex B</b>)</p> <p><input type="checkbox"/> Fumigation &amp; Other Biosecurity Treatment Facility (<b>Annex C</b>)</p> <p><input type="checkbox"/> Facilities for the Inspection of Personal Effects (<b>Annex D</b>)</p> <p><input type="checkbox"/> Fresh Produce &amp; Nursery Stock Inspection Facilities (<b>Annex E</b>)</p> <p><input type="checkbox"/> Animal Products (products containing/ made of dairy product, meat products, animal skin, feathers etc) (<b>Annex F</b>)</p> <p><input type="checkbox"/> Holding of Biological Products (<b>Annex G</b>)</p> <p><input type="checkbox"/> Facilities for Holding, Disposal and/or Processing of Quarantine Refuse (<b>Annex H</b>)</p> <p><input type="checkbox"/> Incineration or Sterilisation Facilities (<b>Annex I</b>)</p> <p><input type="checkbox"/> International Mail and Courier Facilities (<b>Annex J</b>)</p> <p><input type="checkbox"/> Inorganic/ Inanimate Material in Containers (<b>Annex K</b>)</p> <p><input type="checkbox"/> Seed, Stored Products &amp; Stock Feeds (eg rice, lentils, soy beans, etc) (<b>Annex L</b>)</p> <p><input type="checkbox"/> Self Storage Facility (you run a self storage business) (<b>Annex M</b>)</p> <p><input type="checkbox"/> You lease a storage unit within a self storage business (<b>Annex M</b>)</p> <p><input type="checkbox"/> Biosecurity Control Area (<b>Annex N</b>)</p> <p><input type="checkbox"/> Facility for Holding &amp; Inspecting Live Animals at Approved Places of First Arrival (<b>Annex O</b>)</p>	<p><u>General risk goods under the standard</u></p> <p><input type="checkbox"/> Plant Products (e.g. products containing/ made of bamboo, cane, rattan, sea grass, straw, such as baskets, etc)</p> <p><input type="checkbox"/> Used Tyres</p> <p><input type="checkbox"/> Agricultural Compounds</p> <p><input type="checkbox"/> Air Containers</p> <p><input type="checkbox"/> Used Equipment/ Machinery/ Scrap Metal</p> <p><input type="checkbox"/> Timber (products containing/made of wood such as furniture, sawn timber, etc)</p> <p><input type="checkbox"/> Produce (Fresh)</p> <p><input type="checkbox"/> Produce (Frozen)</p> <p><input type="checkbox"/> Used Vehicles (including cars, motorcycles, boats, aircraft, etc)</p> <p><input type="checkbox"/> Used Car Parts</p> <p><input type="checkbox"/> Soil or Water (e.g. test samples)</p> <p><input type="checkbox"/> Fertiliser</p> <p><input type="checkbox"/> Seed/Stock feeds</p>
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16. If you ticked **sea containers (Annex A)** above in 19, list below the nominated MAF Accredited Person(s)<sup>†</sup> who will be responsible for the container checks. Attach a separate list if necessary.

Full Name	MAF AP Number (if registered)	Trained (Y / N)	Training expiry

→ *Go to Question 17*

<sup>†</sup> An Accredited Person is a person who has taken the required training & is approved to check sea containers for biosecurity risks. All sea container importers must have access to sufficient numbers of Accredited Persons to check incoming containers. For details on training providers go to <http://www.biosecurity.govt.nz/border/transitional-facilities/sea-containers/current-ap-training-providers>.





**SECTION E: APPLICATION CHECKLIST**

Ensure you have completed **all relevant sections** of the application & submitted **all required documentation**. Failure to do so may result in delays in processing of applications. Please complete the following checklist (*tick when complete*):

- An application form for approval of a transitional or containment facility and Operator (this form). <http://www.biosecurity.govt.nz/files/regs/trans/register/facility-approval-application.doc>
  - A consent to disclosure of information (Police check) form (for new operator applicants only) where required by the standard. <http://www.biosecurity.govt.nz/files/regs/trans/register/consent-to-disclosure-of-information.doc>
  - An application for a credit account (for new approvals). <http://www.biosecurity.govt.nz/files/biosec/org/application-for-credit.pdf>
  - A facility operating manual (for general transitional facilities there are templates are available to assist you). <http://www.biosecurity.govt.nz/border/transitional-facilities/bnz-std-tfgen>
- NOTE:** All applications, except for Plant Quarantine level I & II facilities, must include a copy of the most recent facility operating manual.
- A site plan showing the layout of your facility, this can be as a part of your operating manual.
  - Proof that the operator has undertaken training (for MAF standard BNZ-STD-TFGEN only) such as a copy of your Operator training certificate or booking confirmation. For information on training go to: <http://www.biosecurity.govt.nz/regs/trans/register>
  - If you are importing sea containers, ensure that there are enough trained MAF Accredited Person(s) available to check your containers. For more information go to: <http://www.biosecurity.govt.nz/regs/trans/register>

**NOTE:** Please allow approximately *six weeks from the time of receiving all correct documentation* to process an application (depending on the type of facility approval). Once your application is processed, a Biosecurity Inspector may contact you to arrange a site visit. For a list of standards, please go to: <http://www.biosecurity.govt.nz/regs/trans#standards>

➔ Go to Section F

**SECTION F: DECLARATION**

I, \_\_\_\_\_ ,  
 (full name)

being the applicant for approval of a Transitional Facility/ Containment Facility and/ or Operator /Nominated Manager, in accordance with section 39 and/ or section 40 of the Biosecurity Act 1993, declare that, to the best of my knowledge, the above information is true and correct. I understand that failure to provide any of the required information may result in rejection of my application by MAF. I have read and understand the MAF Standard(s) I am applying for and have included extra documents where required. I accept to pay all costs associated with the approval of this application.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Please send this signed form to a MAF application centre nearest you**

MAF Facility Approvals  
 PO Box 53066, Auckland Airport  
 Auckland 2150  
 Email: [facilityapprovals@maf.govt.nz](mailto:facilityapprovals@maf.govt.nz)  
 Fax: 09 909 8558

For General Inquiries relating to this application please phone: 09 909 3030 (Option 5)

