# Approval to Import and/or Distribute Hormonal Growth Promotants (HGPs)

**ACVM 17 (July 2021)**

* This application form must be completed by each importer and/or distributor of hormonal growth promotants (HGPs) in New Zealand registered under the Agricultural Compounds and Veterinary Medicines Act 1997 (ACVM Act).
* Send this signed, completed application form electronically with all required documentation to the Ministry for Primary Industries at the above address.
* If there are any changes to the details provided in this application after the application has been submitted, you must promptly inform the Ministry for Primary Industries of the changes in writing.
* Refer to the Privacy Act 2020 and Official Information Act 1982 notices at the end of this form regarding collection of information by the Ministry for Primary Industries.

# Part 1: Importer and/or Distributor Details

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| 1.1 Registered Company Name  Registered company name or partnership names (including the trading name) or individual name. | |
| **Full legal name** |  |

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| 1.2 Trading Name  If different from the registered company name listed in 1.1. |
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| 1.3 Importer and/or Distributor Address and Contact Details | | |
| **Importing and/or Distributing Physical Address** | **Postal Address** | |
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| **Name of Designated Contact Person(s)**  This will be MPI’s primary contact, unless otherwise notified. | **Tel** |  |
| **Fax** |  |
|  | **Mobile** |  |
| **Email** |  |

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| 1.4 Secondary Site of Import and/or Distribution  List any secondary sites where HGPs are imported to and distributed from, and provide details of the functions. | |
| **Address** | **Functions (storage)** |
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# Part 2: Details of Hormonal Growth Promotants

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| 2.1 List of Products  List or append a list of products that you import and distribute. |
| **Product Name and ACVM Registration Number** |
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| **2.2 Responsible Person** | |
| **Name** |  |
| **Position in Company** |  |
| **Relevant Qualifications and Experience** |  |

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| 4 Applicant Statement  This section should be completed by a senior member of staff (such as CEO, Director, person responsible for Quality System) | | | |
| I confirm that:   * I am authorised to make this application as the applicant OR a person with legal authority to act on behalf of the applicant noted in section 2; and * the information supplied in and with this application is truthful and accurate to the best of my knowledge. | | | |
| **Name** |  | **Tel** |  |
| **Signature** |  | **Email** |  |
| **Date** |  |

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| Collection of Information |
| **Collection of Personal Information**  Pursuant to Principle 3 of the Privacy Act 2020, we advise that:   * This information is being collected for the purpose of approving an importer/distributor of hormonal growth promotants under the ACVM Act; and * The recipient of this information, which is the agency that will collect and hold the information, is the Ministry for Primary Industries, PO Box 2526, Wellington 6140; and * The collection of information is authorised under section 10 of the ACVM Act; and * The provision of this information is necessary in order to process this application; and * The supply of this information is voluntary; and * Failure to provide the requested information is likely to result in a return of the application form to the applicant, and may ultimately result in a refusal to approve the importer/distributor; and * Under Principles 6 and 7 of the Privacy Act 2020, you have the right of access to, and correction of, any personal information which you have provided.   **Collection of Official Information**  All information provided to the Ministry for Primary Industries is official information and may be subject to a request made under the Official Information Act 1982.  If a request is made under that Act for information you have provided in this application, the Ministry for Primary Industries will consider any such request, taking into account its obligations under the Official Information Act 1982 and any other applicable legislation. |