**Claim for Payment Form – Milestone Report**

**One Billion Trees Programme**

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| --- | --- | --- | --- |
| Name |  | Date of Claim |  |
| Postal address |  | **Funding Agreement Number** | **1BT-** |
| Contact Number |  |  |  |

**Claim Details**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Block #** | **Milestone #** | **Species/Top Ups** | **Date Planting/Reversion Completed (month & year)** | **Post-planting Completed (month & year) or N/A** | **Number of plants/stems planted (per ha)\*** | **Area**  **(ha)** | **Payment Claimed** | | | | **For TUR use only**  **Payment Recommended** | | |
| $/ha | % | Total $ | | Area (ha) | $/ha | Total $ |
| *1* | *1* | *Natives* | *TBD* |  |  | *40* | *4,000* | *30* | *48,000* | |  |  |  |
| *2* | *1 and 2* | *Manuka* | *July 2019* | *Sept 2019* | *1700* | *50* | *1,800* | *100* | *90,000* | |  |  |  |
| *3* | *2* | *Pinus radiata* | *July 2019* | *Sept 2019* | *1000* | *30* | *1500* | *70* | *31,500* | |  |  |  |
| *3* | *2* | *Erosion* |  |  |  | *30* | *500* | *70* | *10,500* | |  |  |  |
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| Comments/Milestone description | | | | | | | | | | Total | |  | |
| GST | |  | |
| Total incl GST | |  | |

***\*for native planting include number of tall tree species established per hectare*Supporting Information**

Please attach the following supporting information relevant to the Milestone you are claiming. This information will assist in progressing your claim to the next stage.

|  |  |
| --- | --- |
| **Milestone 1 Evidence** | |
| Invoice from nursery/delivery docket | Evidence management plan enacted |
| Pest and animal control practices in place | Fencing invoices where required |
| Milestone 1 Contract conditions met e.g. Archaeological site approval | High land preparation invoices where applicable |
| MPI new creditor form attached\*\* | Proof of bank account attached\*\* |
| *\*\*****Your claim will not be processed without these documents*** | |
| **Milestone 2 Evidence** | |
| Shapefile(s) of the actual area planted/established | Map clearly showing the actual area established (including fencelines) |
| Release spraying of the established area was completed on: / / | Any supporting documentation (Quality Control data, reports, photos) |
| Name of planting contractor/provider: | Native plantings: Species list with total number of each species planted |
| Established area free from weed competition, visually verifiable and actively growing | Minimum stems/ha successfully established as per grant agreement |
| A copy of the Notice provided to Council prior to planting under the National Environment Standards for Plantation Forestry (which includes a copy of your Wilding Tree Risk Calculator score) and any relevant correspondence (if applicable) | A valid resource consent for the activity (if applicable) |
| ***A map/shapefile of some description outlining the actual treated area must accompany your Milestone 2 Claim for Payment*** | |

**Grantee Declaration**

|  |  |  |
| --- | --- | --- |
| I/we hereby declare that the above statements and particulars are correct and complete, and that I/we have complied with the terms of my/our IBT Agreement. | | |
| Name: | Signature: | Date: |
| Position: |  |  |
| *e.g. landowner, forestry right holder, lessee, trustee or other authorised signatory – please specify* | | |

**Next Steps**

Email your completed claim form to [1bt@mpi.govt.nz](mailto:1bt@mpi.govt.nz)

Based on your claim and evidence provided, the Scheme Administrator will determine if a site inspection is required to verify your claim payment. If an inspection is required, a Forest and Land Use Adviser will be in contact within 10 days of receipt of your claim documentation to arrange this site inspection, to occur at an appropriate time, depending on your treatment type. For assistance in completing this claim form or any other questions email [1bt@mpi.govt.nz](mailto:1bt@mpi.govt.nz) or phone 0800 00 83 33.