

Loss of Income/Other Compensation Claim Form

Mycoplasma bovis Programme

Part 1: Your details

To be a claimant you must be a person or business who is the legal owner of the property or goods that were destroyed or damaged, or goods that were affected by movement restrictions as a direct result of an exercise of powers authorised by the Ministry for Primary Industries (MPI).

Claimant's details					
Name (Company director if the claimant is a business)					
Full postal address (Include street number and RI	D)				
City/Region/Province				Postcode	
Trading name (If applicable)					
Email				Telephone	
Preferred method of contact		☐ Telephone	□ Email		
GST information	GST information				
ragistarad?		(If you are a registered GST business use GST exclusive prices) (If you are a NON registered GST business use GST inclusive prices)			
Is someone else acting for you?					
Only complete this section if you wish someone else (an agent) to act on your behalf.					
Name					
Email				Telephone	
Preferred method of contact		☐ Telephone	☐ Email		
DBCAT (DairyNZ, Beef + Lamb New Zealand Compensation Assessment team)		(Number/s)			

Part 2: Tell us about your claim

Losses you are claiming for
To help us better understand and assess your claim can you describe how you calculated your loss.
Your farming business
To help us better understand and assess your claim can you describe your normal farming business operations. (For example: I am a dry stock farmer currently in the process of fattening my stock in preparation for slaughter.)

Timeline of events

Please fill in the timeline of events boxes below, starting with the first contact from MPI and what happened as a result of this. To help you we've provided an example of what to tell us.

When did MPI contact you?	What did they do?	Section of the Act that MPI exercised its powers under? If you don't know or aren't sure write "Not Sure".	What happened?	What would have happened if MPI hadn't exercised its powers?
Example only	Example only	Example only	Example only	Example only
30 August 2019	Issued a Notice of Direction (NOD) 123	Section 122 of the Act	As a result of restrictions on my property (456 Charles Fergusson Road, Wellington) I had to pay my casual employees to feed out animals that normally would've left the property on 3 September 2019.	These employees would've worked less hours, so I would have incurred less costs for wages.

When did MPI contact you?	What did they do?	Section of the Act that MPI exercised it powers under? If you don't know or aren't sure write "Not Sure".		?	What would have happened if MPI hadn't exercised its powers?	
Avoided co	osts					
Please list a	ny costs you wo	uld normally have inc	urred but have avoid	led due to MF	Pls exercise of powers.	
Actions taken to minimise your loss The Act requires you to have taken reasonable steps to minimise or avoid your losses. Please describe what (if any) steps have been taken to minimise the impact on your business.						
Have you r	eceived any o	other payments fro	om MPI in relation	to this clai	m?	
☐ No ☐ \(\) (If YES please boxes)	res	Payment Amount I	Date Paid	What was th	ne payment for?	
Other docu	ıments you no	eed to provide in s	support of your cl	aim		

To help MPI to process your claim quickly, there are some documents we need from you to verify your claim. A list of this information can be found in Part 3.

Declaration (to be completed by the claimant)

I am the legal owner of the property or goods to which this claim applies or have the claimant's authority to sign (for a company, a current director must sign). I have answered all the questions that apply to me and my application and the information I have provided is true and correct.

I authorise MPI to give or obtain information from any other party any other information that in MPI's view is relevant to verifying and/or assessing this claim.

I authorise MPI to pay the assessed amount into the bank account provided with this application.

Your name (print)	Your signature	Date (DD, MM, YYYY)	

Agent to complete (if applicable)

I have completed this form at the request of the person claiming. The information included in this claim has been provided to me by the claimant and/or has been reviewed by them and confirmed as true and correct.

Your name (print)	Your signature	Date (DD, MM, YYYY)		

Part 3: Supporting your claim

Supporting information: Loss of Income/Other

Complete this checklist when you have incurred a loss that is not covered by any other form and attach the relevant documentation to support your claim so we have all the information we need to process your claim quickly.

	Pleas	e provide relevant details and any related documentation on the following:					
1.	□Ва	☐ Bank account name:					
2.		If this is your first claim or your bank details have changed, please attach either a bank deposit slip, a screen shot of your account, or some other proof from your bank confirming your account name and number.					
3.	If you have a claim related to loss of contract eg. calf rearing, leasing, bull servicing, lambs, sheep or loss of revenue, please provide relevant details and any relevant documentation on the following:						
		a copy of the signed contract or agreement					
		copies of written correspondence, emails and texts to confirm the agreement, basis of payment and period					
		copies of stock valuations if appropriate					
		copies of historic killsheets or sale documentation that quantifies your 'business as usual' income					
		copies of financial statements for the previous three years showing your 'business as usual' compared to activity for the time you were affected by MPI's exercise of powers or as long as you have been operating.					
4.	If you have a claim related to feed, please provide relevant details and any related documentation on the following:						
		a copy of the Canterbury Feed Assessment (CFA) or equivalent valuation to confirm total area and product available to graze					
		a valuation or quote which confirms claimed amount.					
5.	If you follow	have a claim related to wages, please provide relevant details and any related documentation on the ing:					
		copies of employee contracts					
		copies of payslips or bank statements which confirm the wages are above the usual remuneration					
		copies of logs confirming the 'business as usual' time to be paid.					
6.	If you follow	have a claim related to royalties, please provide relevant details and any related documentation on the ing:					
		copies of any contract modelling on historic/future royalties.					
		d in your claim without providing all the details asked for and documentation to support your claim, we'll ow. You'll have 20 working days from this notification to provide the information, before we look at					

If your claim is closed and you wish to reapply, you'll need to fill out a new claim form and attach the missing information we asked for when you made your original claim. You won't need to resubmit any documentation that you provided to support your original claim as we'll have this on your file.

Talk to us as soon as you can, if you can't provide the information we've asked for.

closing the claim.

Part 4: Useful information

Where can you get help?

DBCAT is a free service supported by MPI and run independently by DairyNZ and Beef + Lamb New Zealand. They are available to help you:

- understand whether you are eligible for compensation
- clarify what losses you can claim for
- · help you put together your claim
- · support you through the compensation claim process.

Contact information:

Telephone: 0800 32 22 81Email: admin@dbcat.co.nz

Biosecurity Act 1993

The Biosecurity Act 1993 (the Act) provides the legal framework for MPI and others to help keep harmful organisms, such as *Mycoplasma bovis*, out of New Zealand. Compensation may be paid under section 162A of the Act where a person has suffered loss as a result of MPI's exercise of powers under the Act in order to control and eradicate the organism.

Compensation payments are based on showing that your loss was caused as a direct result of MPI exercising powers on your property or goods.

You can claim compensation if:

MPI has exercised powers to eradicate or manage a harmful organism.

- That has caused you to incur a loss, because either:
 - the loss was caused by the damage or destruction to your property, or
 - · the loss was caused by movement restrictions imposed on your goods
- The loss can be verified (complete Part 3: Supporting your claim).

Compensation cannot be paid if losses were incurred:

- · Before MPI's exercise of powers commenced
- · More than one year before the claim was submitted
- Because you have failed to comply with the Biosecurity Act
- · Because your goods are unauthorised or uncleared.

Requesting a re-assessment

Receiving a full or part payment from MPI does not prevent you seeking a re-assessment of your claim. Once payment is made, you may request a re-assessment up to 12 months after you have received payment.

You will need to complete and submit an application for re-assessment form. This is available either on the MPI website, or by contacting the Compensation Co-ordinator. We'll be happy to email one to you.

Once you have completed the application for re-assessment form, you can email one or send it by post/courier to MPI's compensation team, along with supporting documentation

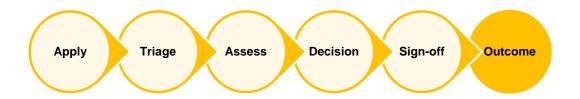
Privacy Act 1993

Please refer to MPI's website for information on our Privacy Policy.

Official Information Act 1982

MPI is subject to the Official Information Act 1982 (OIA) and may be required to disclose information regarding this claim in accordance with its obligations under the OIA.

Our Process



You will receive an email advising that:

- all information has been received and an assessment will commence, or
- further information is required before an assessment can commence. You will have 20 working days to provide this.

If you send in your claim without providing all the details asked for and documentation to support your claim, we'll let you know. You'll have 20 working days from this notification to provide the information, before we look at closing the claim.

If your claim is closed and you wish to reapply, you'll need to fill out a new claim form and attach the missing information we asked for when you made your original claim. You won't need to resubmit any documentation that you provided to support your original claim as we'll have this on your file.

Talk to us as soon as you can, if you can't provide the information we've asked for.

Next Ste	os - Cl	hecklist
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- ☐ Completed Claim Form
- ☐ Signed the Declaration
- ☐ Attached supporting documentation

Contact Information

For general information or to send your claim form please contact the MPI Compensation Co-ordinator:



0800 00 83 33



compensationcoordinator@mpi.govt.nz



www.mbovis.govt.nz



Ministry for Primary Industries Attention: Compensation Co-ordinator PO Box 2526

Wellington 6140



Ministry for Primary Industries Attention: Compensation Co-ordinator Charles Fergusson Building 34-38 Bowen Street Wellington 6011

Note: MPI is unable to provide legal or business advice to claimants.

New Zealand Government