

Loss of Milk Production 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).

\sim			4.5		4
(:	ıaın	ทลท	t'S	UE.	tails

Claimant 3 actails					
Name (Company director if the claims business)	ant is a				
Full postal address (Include street number and RD)					
City/Region/Province				Postcode	
Trading name (If applicable)					
Email				Telephone	
Preferred method of contact		☐ Telephone	□ Email		
GST information					
registered?		(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 ac	ting for y	ou?			
Only complete this sec	ction if you	wish someone else (an	agent) to act on your l	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: A dairy operation with 400 cows, replacement herd grazed off farm and all calves transported from the property after reaching 100kg.)

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 <u>would</u> 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 121 of the Act	As a result of the destruction of my dairy herd on 456 Charles Fergusson Road, Wellington (the property), I have had reduced milk production revenue.	I would have milked this herd and had the revenue from this.

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?
Avoided co	osts				
To help us be	etter understand	and assess your claim	can you describe	how you calc	culated your loss.
The Act requ		taken reasonable step			ses. Please describe what (if esting and selling of silage).
Have you r	eceived any o	ther payments from	MPI in relation	to this clai	m?
☐ No ☐ \(\) (If YES please boxes)	res	Payment Amount Da	te Paid	What was th	ne payment for?
Other docu	ıments you ne	eed to provide in su	oport of your cla	aim	

To help MPI to process your application 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 applying. 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 Milk Production

Complete this checklist when you have incurred income losses from reduced milk solid production (due to part or full culling of your herd or other impacts) and attach the relevant documentation to support your claim so we have all the information we need to process your claim quickly.

1.	Pleas	se provide relevant details and any related documentation on the following:
		Bank account name:
		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.
		a copy of your calculation of loss
		copies of monthly milk statements (Fonterra, Oceania etc.) - these need to be the full statement with all details itemised, not the summary • for a partial cull, these will only need to be for the claim year to date • for a full cull or other impacts, these need to be for both the claim year to date and the entire previous milking season (including any retrospective statements
		copies of agreements such as VOSM or HOSM or any other share milking agreements detailing the percentage of milk revenue you are entitled to
		a monthly cash flow report (from an accounting system) for the last year and the claim year to date (and if possible an Excel workbook showing this information)
		copies of end of year or end of season financial transaction reports
		approximate monthly number of "Cows to the Vat" reports for the last year and the claim year
		copies of any documentation or calculations you have for avoided costs and mitigation of losses.
2.	And v	where applicable, please provide the following additional information:
		copies of agreements with milk companies for special premiums for the claim year e.g. winter milk premiums, A2 milk premiums
		copies of any other information on 'business as usual' practice for high cost items such as feed, fertiliser grazing and wages
		an outline and any supporting documentation for increased milk production.
		nd in your claim without providing all the details asked for and documentation to support your claim, we'll now. 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.

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.

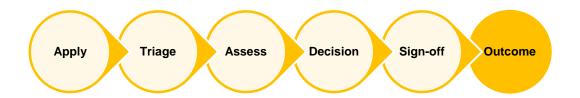
Privacy Act 1993

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 Steps - Check

	Com	pleted	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