

# Details of Contact Persons



## Applicant/Registered Client Details

Show your client number if you have already been registered as a client. →

Client Number (if known)

Please specify your full legal name. →

Full legal name of client or applicant

## Contact Person Details

If your organisation has a person who it would like to be the contact person for a specific aspect of its fishing activity, please specify that person's details here.

Please note the following in relation to contact persons:

- If a contact person is specified for an aspect of your organisation's fishing activity, all correspondence for that aspect will be sent directly and only to that person.
- Your organisation may have many contact persons, however it may have only one person for each contact type.
- A contact person may be a person from either within or outside of your organisation. eg Head of accounts, quota broker.
- If you want a contact person to also have signing authority for an aspect of your organisation's fishing activity, a separate form must be completed.

### Postal Address of the Contact Person

This address is only required if the contact person will receive correspondence for the specified contact type at a postal address which is different from your organisation's Business Postal Address.

### Department or Organisation

If the contact person works within your organisation, specify which department. If the contact person works for a separate organisation, specify the name of that organisation.

### Contact Type

Please specify the aspect(s) of your organisation's fishing activity which this person will be the contact person for. You may choose one or more of the following contact types:

- All
- High Seas
- Finance
- LFR licences
- Permits
- Quota
- Quota Allocation
- Vessels
- ACE
- Clients
- Foreign Fishing
- Mortgages
- Returns Management (MHRs, LFRRs)
- Special Approvals
- Aquaculture

You may not specify a contact type more than once.

Please turn over for more notes

If you are completing this form as part of the client registration process, please use the space available in the "Contact Persons Details" section of the client registration form first.

1

Full legal name of contact person

First or given names

Surname or family name



Does the contact person work within your organisation?  No  Yes

Postal address See notes

Department or Organisation See notes

Telephone number

Fax number

E-mail

Contact type(s) See notes

Relationship Type See notes on back page

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Full legal name of contact person

First or given names

Surname or family name



Does the contact person work within your organisation?  No  Yes

Postal address See notes

Department or Organisation See notes

## FishServe Use Only

Initials \_\_\_\_\_

Data Entry completed \_\_\_ / \_\_\_ / \_\_\_

Client number

OFFICE USE ONLY

DATE PRESENTED

### Relationship Type

Please specify the contact person relationship type:

- Accountant
- Agent
- Chief Executive
- Consultant
- Contact
- Director
- General Manager
- Manager
- Managing Director
- Power of Attorney
- Secretary
- Shareholder
- Solicitor
- Other

If you require more than the space provided for 3 contact persons on this form, please use a copy of this form, or obtain an additional form from FishServe.

Telephone number

Fax number

E-mail

Contact type(s) *See notes*

Relationship Type *See notes*

### 3 Full legal name of contact person

First or given names

Surname or family name

Does the contact person work within your organisation?  No  Yes

Postal address *See notes*

  

Department or Organisation *See notes*

Telephone number

Fax number

E-mail

Contact type(s) *See notes*

Relationship Type *See notes*

## Declaration

If there are more signatories than space provided make further declarations on a copy of this page.

#### I declare that:

- The information I have given on this application is true and correct.
- I am authorised to provide this information and make this declaration.
- I am aware it is an offence to provide false or misleading information or omit any material information.
- I understand the applicant is required to notify FishServe if there are any changes in the particulars I have provided in this application form.
- I have read and understood the Collection of Personal Information details supplied with this form.

Full Legal Name (Please PRINT)	Position	Signature	Date
			/ /
			/ /
			/ /
			/ /

### Collection of Personal Information

In regard to any information being collected on this form that is personal information, notification is hereby provided, in accordance with Principle 3 of the Privacy Act 1993 of the following matters:

This information is being collected for purposes relating to the management of fisheries resources in accordance with the Fisheries Act 1996 and regulations made pursuant to the Act.

The agency that will collect and hold the information is FishServe (Commercial Fisheries Services Ltd) (P.O. Box 297, Wellington). Personal information will also be recorded on publicly available registers.

The provision of this information is mandatory under the Fisheries (Reporting) Regulations 2001.

It is an offence under the Fisheries Act 1996 and the Fisheries (Reporting) Regulations 2001 to neglect or refuse to supply the information required, and to fail to complete and furnish any of the required information, and to make a false or misleading statement or entry of information. Penalties are set out in the Fisheries Act 1996 and in the Fisheries (Reporting) Regulations 2001.

You are reminded that under Principles 6 and 7 of the Privacy Act 1993, you have the right of access to, and correction of, any personal information which has been provided.