**Variation from the flora survey guidelines – protected plants**

**Important information for applicants**

The *Flora Survey Guidelines – Protected Plants* (Flora survey guidelines) provide requirements and further information regarding:

* Who is suitably qualified to undertake a flora survey;
* The extent of the area that must be surveyed;
* What flora survey methods must be used;
* What must be included in a flora survey report.

Under the Nature Conservation (Plants) Regulation 2020 (the plants regulation) a person may ask the chief executive to agree to an alternate protected plant survey approach in limited circumstances. A person may ask the chief executive to agree to the following:

* Section 142(2)(a) - a person as a suitably qualified person to conduct a flora survey; or
* Section 134(1) - a reduced flora survey buffer zone; or
* Section 143(1) - an alternative flora survey method.

The information provided here will enable your application to be processed as prescribed by the under the plants regulation and guidelines*.* Your application must be assessed, and an authority granted by the chief executive before you can proceed with the proposed activity. **Your application may take up to 15 business days to process.** This timeframe can extend if further information is required to assess your application.

If you have queries about how to complete this form correctly or need guidance contact Permit and Licence Management on **1300 130 372 option 4**.

**Privacy statement**

Information you provide on this form is being collected by the Department of Environment and Science (the department) to process and administer your request for a variation to the flora survey guidelines (protected plants) as authorised under the Flora survey guidelines. Some information may be provided to the Department of Agriculture and Fisheries and Queensland Health in order to investigate allegations of unlawful activity, biosecurity or health issues, if required. Information regarding your status as a holder of this type of authority may be provided to any party upon request. Your personal information will not be disclosed to any other parties unless authorised or required by law. More information on our commitment to privacy is available on our website: <http://www.des.qld.gov.au/legal/privacy.html>.

**Applicant information**

An authority may only be granted to an individual or corporation. A corporation must have an office in Queensland to be eligible to apply for an authority. Please tick the appropriate box:

**An individual** → **Complete** Section 1 **applicant details — then complete sections 3 to 9.**

**A corporation** → **Complete** Section 2 **applicant details — then complete sections 3 to 9.**

1. **Applicant details for an individual**

|  |  |  |
| --- | --- | --- |
| Applicant’s family name | | Title |
| Applicant’s given name/s | | Date of birth |
| Residential address (not a post office box) | | Postcode |
| Telephone (business hours) | Mobile | |
| Telephone (after hours) | Email | |
| Postal address (write ‘as above’’ if same as residential address) | | Postcode |

1. **Application details for corporations**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Registered legal entity name (not a business trading name) | | | | |
| Trading name/s (if applicable) | | | | |
| Registered business address (not a post office box) | | | | Postcode |
| Telephone (business hours) | | | | |
| Email | | Website | | |
| Postal address (write ‘as above’ if same as business address) | | | | Postcode |
| Australian Business Number / Australian Company Number / Association Number, or title and section of legislation under which corporation has legal status | | | | |
| Name of principal of corporation | Signature of principal of corporation (or person authorised to sign on their behalf) | | Date | |

# Person in charge identity details for the corporation

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Title | \*First name | Middle name | \*Surname | \*Date of birth |
|  |  |  |  |  |

# Person in charge registered / residential address

|  |  |  |  |
| --- | --- | --- | --- |
| \*Registered / residential address (not a post office box) | \*Suburb | \*State | \*Postcode |
|  |  |  |  |

(write ‘as above’’ if same as registered residential address)

|  |  |  |  |
| --- | --- | --- | --- |
| Postal address | suburb | State | Postcode |
|  |  |  |  |

# Person in charge contact details – email and phone contact is mandatory.

|  |  |  |  |
| --- | --- | --- | --- |
| Email address |  | | |
| Phone type  home phone  office phone  mobile phone | | Area code | Phone number: note: 10 digits (including area code) |

1. **Application contact details**

Same as applicant  Alternate contact person

An alternative contact nominated by the legal entity which has submitted, or will in future submit, applications to be assessed by the department. All departmental correspondence relating to the assessment of applications will be directed to the application contact, however, if the application results in the issuing of a relevant authority, the relevant authority will be sent to the customer contact or if nominated, the primary contact.

|  |  |
| --- | --- |
| \*Name or position |  |
| \*Email address |  |
| \*Primary phone.  Note: 10 digits (including area code) |  |
| Secondary phone |  |

1. **Request type**

Please identify the purpose of the request (please tick the appropriate box):

***Request to approve a person as a suitably qualified person →*** *Complete Section 5 - then complete section 8*

***Request to approve a reduced flora survey buffer zone →*** *Complete Section 6 - then complete section 8*

***Request to approve an alternative flora survey method →*** *Complete Section 7 - then complete section 8*

1. **Request to approve a person as a suitably qualified person**

Note: if you are a person that meets the requirements of the self-assessment grading system set out in Section 4.2.1 of the Flora survey guidelines, then you do not need to make this request.

Evidence will need to be supplied for a person to be considered ‘suitably qualified’ including professional qualifications or formal training (in plant identification and Queensland flora taxonomy) or other appropriate training and/or experience in identifying critically endangered, endangered, vulnerable or near threatened plants.

**5(a) Attachments**

For a request to consider a person as ‘suitably qualified’ who does not currently meet the requirements of the self-assessment grading system in the Flora survey guidelines, attachments must include:

1. evidence demonstrating that the persons skills and experience are appropriate to identify critically endangered, endangered, vulnerable or near threatened plants; and
2. a resume demonstrating appropriate credentials; and
3. referee statements from suitably qualified persons to support flora survey experience (if appropriate).

List all attachments to this application in the space below.

|  |
| --- |
| Attachments (label all attachments alphabetically for example, “Attachment A”) |

1. **Request to approve a reduced flora survey buffer zone**

The extent of an area to be surveyed is the *clearing impact area*, which includes both the ‘area to be cleared’ (to the extent it is within a high risk area) and a ‘buffer zone’.

Provide the street address, real property description(s) of the land(s) in which the project is located and local government area. (If you require more space, attach a separate sheet.)

|  |
| --- |
| Street address |

Provide a specific location within the property boundaries, a property name or attach a map with the project area clearly delineated. Also include the map name/details.

|  |
| --- |
|  |

Geographical coordinates

|  |
| --- |
|  |

Map

|  |
| --- |
| Insert/Paste Map Here |

**6(a) Attachments**

For a request to reduce a buffer zone please provide:

* 1. a written explanation of why a reduced buffer zone is requested; and
  2. a copy of a flora survey trigger map for the area; and
  3. a map or plan of the area, showing the ‘area to be cleared’, and the proposed ‘buffer zone’. With an overlay of the surrounding property boundaries, and an overlay of the habitat types for the area.

Note: If the request is approved, the submitted map/plan will be referenced as the approved plan with the decision notice and will be required to be kept by the applicant as evidence for any future clearing applications.

List all attachments to this application in the space below.

|  |
| --- |
| Attachments (label all attachments alphabetically for example, “Attachment A”) |

1. **Request to approve an alternative flora survey method**

Prior to using an alternative survey methodology, the chief executive must be satisfied that the alternative survey methodology has previously been used specifically and successfully for identifying the presence of critically endangered, endangered, vulnerable or near threatened plants, and is a methodology (or part of a methodology) that is described in a paper published by a peer reviewed journal.

Details of the location or the activity may be necessary to provide justification that approval of an alternative method is required.

**7(a) Attachments**

For a request to use an alternative survey methodology, attachments must include:

1. An explanation of why an alternative survey methodology is required, for example,
2. why the Flora survey guidelines survey methods will not achieve the required outcomes; or
3. the features of the area that explain why an alternative method should be used. For example, environmental aspects, type of vegetation communities or the target potential critically endangered, endangered, vulnerable or near threatened plant species.
4. Justification and outline of the proposed method and evidence that the method is suitable for identifying the presence of critically endangered, endangered, vulnerable or near threatened plants within the clearing impact area. This will need to be prepared by a suitably qualified person.

List all attachments to this application in the space below.

|  |
| --- |
| Attachments (label all attachments alphabetically for example, “Attachment A”) |

1. **Declaration**

Note: If you provide inaccurate or misleading information in this application you may be liable for prosecution under the relevant Acts or Regulations.

* I do solemnly and sincerely declare that the information provided is true and correct to the best of my knowledge and I make this solemn declaration conscientiously believing the same to be true.
* I understand that all information supplied on or with this application form may be disclosed publicly in accordance with the *Right to Information Act 2009* and the *Evidence Act 1977.*

|  |  |
| --- | --- |
| Applicant’s name | |
| Applicant’s signature | Date |
| If the applicant is a corporation, please indicate your position in the corporation. | |

1. **Application checklist**

All sections on application form completed, signed and dated.

Supporting information attached.

Flora survey trigger map (sections 4 and 6)

Resume of qualifications and/or experience (section 5)

Proposed buffer zone (section 6)

Justification of alternative flora survey method (section 7)

Privacy statement acknowledged

Please return completed application to: **Email:** [palm@des.qld.gov.au](mailto:palm@des.qld.gov.au)

**Post:** **Permits and Licensing**

**Department of Environment and Science**

GPO Box 2454

Brisbane Queensland 4001

The Nature Conservation (Plants) Regulation 2020 may be obtained from the Office of Queensland Parliamentary Counsel website <http://www.legislation.qld.gov.au>

Code of practice, guidelines and the Information sheet – Wildlife authorities and privacy may be obtained from the department’s website <http://www.des.qld.gov.au/> or by contacting Permits and Licensing on 1300 130 372, option 4.