**New Zealand Advanced Notification for Non-Governmental Activities in Antarctica**

**Please give as much information as possible about your proposed activities at this time.** Please email this form to **antarctica@mfat.govt.nz.**

**Tourist and non-Governmental Activities in the Antarctic**

Advanced notification of activities is requested in accordance with Antarctic Treaty Recommendation XVIII-1 and Resolution XIX-3.

The New Zealand Antarctica (Environmental Protection) Act implements The Protocol on Environmental Protection to the Antarctic Treaty.

The New Zealand Antarctica (Environmental Protection) Act applies to all of the following:- any New Zealand citizen and to any person ordinarily resident in New Zealand; members of an activity which is organised from New Zealand; members of an activity that proceeds from New Zealand as it’s final point of departure; in respect of any act or omission occurring on board any ship or aircraft, to any person on board any ship or aircraft that is— (i) a New Zealand ship or a New Zealand aircraft; or (ii) any other ship, whether registered or not and of whatever nationality, which proceeds from New Zealand as its final point of departure for Antarctica. In practice, the Act does not apply to members of official expeditions of other Antarctic Treaty parties (other countries in the Antarctic Treaty).

**A: Proposed Activities Organizer**

|  |  |
| --- | --- |
| **Company name:**  | **Contact person**:  |
| **Company address:**  | **National registration of Company:**  |
| **International phone:** **International fax**:  | **Expedition Staff1 Total number:**   | **Expedition Staff1** **Nationalities:** |
| **Company website**: |  |

**B: Details of transport and equipment to be used for the proposed activities**

(Complete these panels only once if all **proposed activities** planned do not vary in their use of transport or equipment: where these vary, complete the panel for every **proposed activity**)

**B.1 Vessel / aircraft used for transport to / from Antarctica**

|  |  |
| --- | --- |
| **Vessel / aircraft registered name:**  | **Vessel / aircraft type**:  |
| **Vessel / aircraft passenger carrying capacity**: |
| **National registration:**  |
| **Vessel ice rating (if applicable):**  |
| **Ship □ Yacht □ Aircraft □**  | **Vessel / aircraft fuel capacity**  |
| **Vessel / aircraft fuel type:**   |
| **Intended use of vessel / aircraft**   | **Vessel / aircraft call sign**:  |
| **INMARSAT number/fax**:  |
| **Radio frequency**:  |
| **Captains / commanders** | **Crew2**:  |
| **Name(s)**  | **Nationality (/ies)**  | **Total number**  | **Nationality (/ies)**  |
|  |  |  |  |
|  |  |  |  |

**B.2 Equipment to be used within Antarctica / south of 60**°

|  |  |
| --- | --- |
|  |  |
| **Number and types of aircraft to be used**:  | **Number and types of other vessels or vehicles (e.g. small boats, snowmobiles) to be used**:  |
| **Number**  | **Type**  | **Use** | **Number**  | **Type**  | **Use** |
|  |  |  |  |  |  |

1 **Staff**: Expedition personnel, guides, lecturers, small boat drivers (exclude crew serving these functions).

2 **Crew:** Vessel’s captain and officers, helicopter pilots, crew and hotel / catering staff (exclude Staff, Passengers and Observers).

**C: Contingency planning**

|  |
| --- |
| **Type and amount of insurance cover, including name of insurer(s):** |
| **Arrangements for self-sufficiency and contingency plans, including for medical evacuations and search and rescue in the event of an emergency:** |

**D: Expedition Details** (complete one of these panels for every separate cruise / expedition you are organizing)

|  |  |
| --- | --- |
| **Planned date of embarkation**:  | **Planned port of embarkation**:  |
| **Planned date of disembarkation:** | **Planned port of disembarkation**:  |
| **Estimated number of Passengers3 to be carried:**  | **Nationality (/ies):**  |
|  |  |
| **Estimated number of Observers or National Representatives4 to be carried:**  | **Nationality (/ies) :** |
|  |  |
|  |  |
| **Activities to be undertaken** | **Purpose of each activity:** |
|  |  |
|  |  |
|  |  |
| **Intended itinerary** — places to be visited, giving estimated dates: |
|  | **Estimated Dates** | **Places to be visited** |
|  |  |  |
|  |  |  |
| **Identification of potential impacts** |
|  |  | **Short Summary** |
| **Do you intend to enter or undertake any activity in any Antarctic Specially Protected Area (ASPA)?** | **Yes or No or Unsure at this time5** |  |
| **Do you intend to use any fuel, radionuclide, chemical, paint or other substances?** | **Yes or No or Unsure at this time5** |  |
| **Do you intend to use explosives?** | **Yes or No or Unsure at this time5** |  |
| **Do you intend to deliberately bring any plant (including seeds), animal, microorganism or non-sterile****soil to Antarctica?** | **Yes or No or Unsure at this time5** |  |
| **Do you intend to restrain, remove or otherwise interfere with any plant (such as moss , fungi, lichen and algae) or animal, at any stage of its life cycles, or its habitat?** | **Yes or No or Unsure at this time5** |  |
| **Do you intend to take any physical samples (such as rock, soil, fossil, water, ice, bones or feathers )?** | **Yes or No or Unsure at this time5** |  |
| **Do you intend to install, access or use any equipment in the field for any length of time (such as markers, stakes, weather stations or other data recorders)?** | **Yes or No or Unsure at this time5** |  |
| **Do you intend to make any disturbances (such as tracking, vehicle use, earth moving or building structures) to ice-free areas?** | **Yes or No or Unsure at this time5** |  |
| **Do you intend to visit or occupy any sensitive sites with restrictions or guidelines or access any previously unused areas?****(e.g. Antarctic Specially Managed Areas (ASMA) and/or Zones within the ASMA, Important Bird Areas, Historic Sites and Monuments, High altitude geothermal sites, CCAMLR CEMP sites, etc.)** | **Yes or No or Unsure at this time5** |  |
| **Do you intend to create any other disturbances (such as noise or dust)?** | **Yes or No or Unsure at this time5** |  |
| **Do you intend to use Remotely Piloted Aircraft Systems (RPAS) or other automated marine or terrestrial vehicles?** **(\* RPAS include drones, quadcopters, hexacopters, octocopters, multirotos and other unmanned aerial vehicles.)** | **Yes or No or Unsure at this time5** |  |

3 **Passengers:** Members of the Expedition that are not Staff or Crew, excluding Observers / National Representatives.

4 **Observers** or **National Representatives** (e.g. scientists)

5 If a final version of this document is requested as plans become confirmed, all answers will be required to be a Yes or No (and not Unsure at this time).

**E: Existing Notification /Permit Details**

|  |
| --- |
| **Does some part of this activity come under any existing (New Zealand or other Country / Competent Authority) notification/permits? Or in the process of applying for such documents?****(please list and provide an electronic copy of the documents)**  |
| **Country / NZ Agency** | **Contact details** | **Notification / Permit Name**  | **Notification / Permit Name Description** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (*Proposed Activities Organizer)*

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_