

Poison Use Statement – Petfood

Ministry for Primary Industries
Manatū Ahu Matua



Effective from July 2022

This statement is made for the purposes of clause F2.12 and F2.13 of the Animal Products Notice: Production Supply and Processing. **This statement has effect for 3 months from date of signing, unless replaced.**

Responsible Person Name (see note 1): _____

Phone: _____ Email: _____ Fax: _____

Physical address covered by this statement: _____

Farm address (rapid number and road) of land covered by this statement: _____

Detailed description of the physical boundaries of the area of land covered by this statement (see note 2): _____

1 Past Poisoning Activities (see note 3)

Yes No

- 1.1 **Group 1 Poisons.** Over the last **month** to the best of your knowledge have any of these poisons been laid in the area of land covered by this statement? Yes No
- 1.2 **Group 2 Poisons.** Over the last **2 months** to the best of your knowledge have any of these poisons been laid in the area of land covered by this statement? Yes No
- 1.3 **Group 3 Poisons.** Over the last **4 months** to the best of your knowledge have any of these poisons been laid in the area of land covered by this statement? Yes No
- 1.4 **Group 4 Poisons.** Over the last **3 years** to the best of your knowledge have any of these poisons been laid in the area of land covered by this statement? Yes No

For each poison that you answered “yes” to above, please fill in the following details.

Name of poison	Date poison used	Geographic location where each poison laid	Are the poisons laid so as to be inaccessible (see note 4) Yes / No

2 Future Poisoning Activities

Yes No

- 2.1 Do you intend to lay poisons in the area of land covered by this statement within the next 3 months? Yes No

If you answered “yes” to above, please fill in the following details.

Name of poison	Date poison to be used	Geographic location where each poison will be laid	Will the poisons be laid so as to be inaccessible (see note 4) Yes / No

I agree to notify **any changes** to this statement that may occur within the 3 months from the date of signing to (please print name) _____ for whom this statement is provided.

I understand that this declaration must be provided to, and will be retained by the primary processor.

I understand that the primary processor may be required to provide a copy of this declaration to the Ministry for Primary Industries to meet their requirements under the Animal Products Act 1999.

I declare that the information provided in this form is true and accurate.

Responsible person signature: _____ Date: _____

It is an offence under section 127 of the Animal Products Act 1999 to provide false or misleading information in this statement. Under the Privacy Act 1993 you have certain rights of access to and correction of personal information held about you

Notes:

1. Responsible person

This statement must be completed by a person with the relevant knowledge of poison use on the land and who is the landowner, manager or another person with the authority to complete and sign a poison use statement in respect of that land.

2. Area covered

The description of the area and physical boundaries covered by this statement must be clear. The physical boundaries of the area covered may be defined by attaching a copy of a topographical map using a standard 1:50,000 scale with the boundaries of the property marked.

3. Poisons

The poisons listed are the active substances. These active substances are incorporated into a range of commercial products. If you are unsure of the active substance in poisons used on the land, you may need to look at the product labels or use other sources of information to confirm what these are.

Any poisons used on the land must be listed on this statement regardless of whether they have been applied:

- (a) by aerial drop, bait stations, bait bags, within farm buildings, or any other means; and
- (b) by the responsible person or some other person such as a contractor.

Poison Group	0	1	2	3	4
Poison	<ul style="list-style-type: none">• Cholecalciferol• Hydrogen cyanide• Phosphorus• Potassium cyanide• Sodium cyanide	<ul style="list-style-type: none">• Zinc phosphide• Para – aminopropiophenone• Sodium nitrite• Any other poison not covered in groups 2 to 4 (except cyanide or cholecalciferol)	<ul style="list-style-type: none">• Diphacinone• Pindone	<ul style="list-style-type: none">• Coumatetralyl• Sodium monofluoroacetate (1080)	<ul style="list-style-type: none">• Brodifacoum• Bromadiolone• Difethialone• Difenacoum• Flocoumafen
Caution period (all species)	None	1 month	2 months	4 months	3 years

4. Inaccessible poisons

Despite the information provided in the above table as per clause F2.9 of the Animal products Notice: Production, Supply and Processing, a listed hunter or processor-approved hunter may present hunted animal material procured from poisoned land or buffer zone land for primary processing if:

- (a) the animal is not a pig; and
- (b) the relevant land was not administered by the Department of Conservation; and
- (c) all poisons used were:
 - I. poisons in group 0, 1, 2 or 3 of the applicable Table; and
 - II. used solely in bait stations that were correctly situated and used; or
 - III. used solely in buildings that could not be accessed by the applicable animal; or
 - IV. otherwise inaccessible to the animal due to impassable geographical features (such as rivers, sea, cliffs or steep ravines); and
 - V. cliffs or steep ravines); and
- (d) the responsible person completing the poison use statement believes that any poison used was not, or was not likely to have been, accessed by the applicable animal.

A "bait station" is a rigid device or container designed or adapted to physically contain baits in such a way as to:

- (a) allow unrestricted access by target pests while preventing or minimising spillage of bait and access to off-target species; and
- (b) protect baits from the elements and extend their usable life.

5. Electronic submission.

This statement may be provided electronically, but only with the consent of the recipient.