

# Record of information - seeking approval to sell or destroy fishing equipment seized under the Submarine Cables and Pipelines Protection Act 1996 (SCAPPA)

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Last updated: November 2021

This document is uncontrolled if printed. Please refer to the Maritime New Zealand website for the latest version.

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## About this form

This form may be used to seek approval for the sale or destruction of fishing equipment seized by a Protection Officer under SCAPPA Section 18.

While it is not mandatory to use this form when seeking approval, Maritime NZ recommends that you do so as it will assist in providing all of the information we require to make a decision.

Ensure that all necessary information in the relevant sections are completed, and that no information is missing from those pages. If you require more space, you may attach additional pages when submitting this form.

Ensure you have [read the guidelines](#) associated with submarine cables and SCAPPA before you complete this application.

# 1. Personal Details

All applicants should complete this section.

Complete all of these fields

Title (Specify)

Surname

Given name(s)

First & any middle names

Date of Birth

DD / MM / YYYY

Home phone

E.g. +64 1 234-5678

Mobile phone

E.g. +64 1 234-5678

Fax number

E.g. +64 1 234-5678

Email address

Postal address

City

Country

Postcode

Preferred means of contact

Email

Post

Phone

Fax

(tick only one)

By signing below, you confirm that all information contained in or supplied in conjunction with this application is true and correct, to the best of your knowledge.

**Signature -**

Date signed

DD / MM / YYYY

## 2. Record of information - seeking approval to sell or destroy seized fishing equipment

Only complete this section if you are seeking approval to sell or destroy fishing equipment that was seized by a protection officer under SCAPPA Section 18(1).

Applicant name

Name of Protection Officer who seized equipment   
[If different from applicant]

Has the owner of the equipment been identified?  Yes  No

Protection area where equipment was seized

Date of equipment seizure   
DD / MM / YYYY

Police Station where notice of seizure was posted

Date notice of seizure was posted   
DD / MM / YYYY

**NOTE:** SCAPPA Section 18(4) only allows the destruction or sale of seized equipment if the owner has not been identified **AND** 60 days have passed since the notice of seizure was posted at the Police station nearest to the seizure.

List details of the seized equipment

- E.g. Description, make/model, any serial numbers, etc.

Detail why the equipment was seized, and reason for belief that the equipment was

left there by a ship to which the protection order applies

[Redacted]

Detail if you are aware of any other persons with an interest in the seized property

[Redacted]

- Include names and the nature of their interests

Detail any other efforts made to identify the owners of the property or other persons with an interest in the property

Other than posting the notice of seizure at the police station

[Redacted]

Detail why sale or disposal of the equipment is reasonable and appropriate

[Redacted]

Detail any expected costs or surplus from the sale or destruction, if it were to take place

[Redacted]

Is there any other information you want to provide?

- Detail here. Attach any relevant supporting documentation with this application.

[Redacted]

## 6. Where to send your form

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Send your completed form and the other documents required to Maritime NZ by email, courier or post.

If your application is incomplete or missing information we will need to request further information, documentation or evidence from you, which will delay a decision on your application

Sending your application by email is preferred. Remember to complete all of the required information and sign the form before scanning and attaching to the email, along with any other supporting documents.

Make sure scanned copies of your documents are legible and of a good quality.

There are no fees payable for this record of information.

**Email your application to:**

**Or**

**Courier your application to:**

Maritime Systems Assurance Team  
re: SCAPPA Application  
Maritime New Zealand  
PO Box 25620  
Wellington 6140  
NEW ZEALAND

**Or**

**Post your application to:**

Maritime Systems Assurance Team  
re: SCAPPA Application  
Maritime New Zealand  
PO Box 25620  
Wellington 6140  
NEW ZEALAND

## 7. Contact us for help

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If you need more information about the requirements for your application, send us an email:

[internationalshipping@maritimenz.govt.nz](mailto:internationalshipping@maritimenz.govt.nz)

Tell us what you need help with and remember to include your contact details (email address and phone numbers).

## 8. Privacy

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Personal information collected in this form will be used for the purpose of assessing your application. Maritime NZ will not disclose personal information other than when permitted or required by law to do so.

If you wish to access or correct personal information Maritime NZ holds about you, please contact the Privacy Officer at PO Box 25620, Wellington 6140, or phone (04) 473 0111.