

# ACCREDITATION / REGISTRATION APPLICATION Plant Health Act 2009

ICA/CA Accreditation Sec 16 / Registration Sec 26

APPENDIX 1
ICA / CA / IR

## APPLICATION for ACCREDITATION / REGISTRATION or ANNUAL RETURN (ICA / CA / IR)

Complete clearly and return to Biosecurity SA - Plant Health Operations, 33 Flemington St, Glenside SA, 5065. (Please print. See Conditions / Application Instructions on pages 2 and 3 of this Application.)

Type of application bein NOTE; This application can	•				w □ Amendment		
Has Business previously but If yes, provide Interstate F				Yes □ No S	-		
Operational Procedure / ICA/CA/IR Number		nent (# Arrangement details rangement Operational			)		
ICA 22 Tra	nsfer of (	Grape Must and U	nfiltered	Juice from a	PIZ or PRZ to a PEZ		
Applicant Details.							
Type of Ownership of Bu	siness. (Tic	k or mark one)					
□Individual □Partners	hip □Inco	orporated Company	□Cooperat	ive Association	□Trust □Government		
Individual Name:	Last Name		ŀ	First Name			
Business Name:			<u> </u>	l			
Postal Address Line 1:				Line 2:			
Suburb:			;	State:	Postcode:		
Partner Names:	Last Name			First Name			
(Provide additional partners	Last Name			First Name			
on a separate sheet)	Last Name		I	First Name			
Other Trading Names:							
ABN / ACN Number:							
offence or other offence involv A Company must attach a cop A Co-operative Association m  Facility / Accreditation D	y of <i>Certifica</i> ust attach a	ation of Incorporation with	new applicat	ions.	Certification is attached		
Facility Address Line 1:	Ctano		l	Line 2:			
Suburb:			;	State:	Postcode:		
Accreditation Contact:				First Name			
Position:							
Property Valuation No.:		Section: Hundred:					
Contact Details:	Phone:		Mobile:				
	Fax: Email:						
Postal Address			L	ine 2:			
Postal Suburb			\$	State:	Postcode:		
Persons Permitted to Sig	gn or Veri	•		iven Nema(a)	Charleson Cianatius		
Role Certification Controller / Response	sible Person	Last Name	Gi	iven Name(s)	Specimen Signature		
Backup Cert Controller / Respon							
Authorised Signatory / Responsi							
Authorised Signatory / Responsi							
Products Certified / Impo	rted:						
(List all fruit & vegetable types, mach grapevines or nursery stock)	nery,						
Seasonal Operator: (tick or Y	= Yes) NO	YES If yes, indic	ate operating	months			
Importing Details	, <u> </u>		<u> </u>				
Consignments per year		Nursery Member	ship v= vos /A	I= No NGISA	NIASA AGCAS		
States of Origin: (tick or Y = Ye	s) QLD		NSW		AS Overseas		
Clatto of Origini, (lick of f = fe	o, QLD	, vio	14044	141   17	3 7010000		

ISSUE: 3.1

Date: 14/6/11



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Product / Certification Assurance R			
The business must carry out the necess			
accordance with the applicable Operatio			
requested below and is granted and end	,		on this form.
I hereby request to use the following alte	ernative or additional record		A FI
		Granted by PIRS/	
		Inspector Initials /	Stamp STAMP
1 / NA/a the a consideration and are discount/a) de la			
I / We the undersigned applicant(s) do h my/our knowledge and belief and make			
business as a representative appointed		ii, or on benan or the above	-mentioned
		Cianatura	Data
*Name of Partner / Director (print)	Designation	Signature	Date
			/ /
			/ /
			/ /
Note: Where applicants are members of a partr	orehin, oach partner must sign	the application	, ,
For corporations/associations a Director, Com			ompany must sign.
Use the following checklist to ensure you have	provided key information to ena	able the application to be proce	ssed.
☐ You, All Partners or Director have signed	•		ABN is provided.
☐ Type of ownership indicated. ☐ Copy of			
Applicants must provide an Annual Return			
Incomplete applications will delay processing Please direct any queries regarding this appl			s Officer on 8207 7814
Office Use Only			
DESK AUDIT  Passed  No	t Passed because		
Alternate record-keeping granted Yes	□ No		
		/	
Name of Desk Auditor (please print)	Signature of Officer	Date	IRSA STAMP

### Conditions of Accreditation S16 / Registration S26

For the purposes of this accreditation / registration the following conditions may apply:

- The applicant must operate in full accordance with the Act and for ICA/CA Arrangements with the applicable Operational Procedure, which includes maintenance and provision of prescribed records for regular audit.
- The applicant is responsible to ensure that staff undertaking responsibilities required of the accreditation are adequately trained to do so.
- The frequency and number of audits will be determined by the Minister and carried out by persons authorised by the Minister.
- All fees for audits and inspections will be set by the Minister and the costs borne by the accredited person or business.
- The applicant will receive a Certificate of Accreditation / Registration which must be prominently displayed at the Business Facility.
- Restrictions may be imposed on the type of product an importer may bring into South Australia.

A copy of the relevant Operation Procedure or Act can be viewed or downloaded from - www.pir.sa.gov.au/ica

#### Issue of Assurance Certificates / Registration of Importers / Verification of Product

The Plant Health Act 2009 requires any person issuing a Plant Health Assurance Certificate (PHAC) to be accredited to do so. Penalties apply. (see section 25).

The Plant Health Act 2009 requires any person bringing or introducing plant or plant related products into SA to be registered (section 26) and imported products require verification. It is an offence to import without being registered or to fail to have imported product verified. Penalties apply (see sections 7, 25 and 33).

Only an accredited person may issue an assurance certificate (PHAC) or verify imported products (ie verify that an assurance certificate or other document relating to a plant or plant related product under a corresponding law complies with the requirements of the corresponding law). It is an offence to issue a Plant Health Assurance Certificate or verify imported product without being accredited. Penalties apply (see sections 7, 25 and 33).

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**ENSURE YOU ALSO READ PAGE 3** 



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### APPLICATION for ACCREDITATION / REGISTRATION or ANNUAL RETURN (ICA / CA / IR)

#### **Application Notes**

The form must be fully completed by an Applicant on their behalf or on behalf of a legal entity/business that they have authority to represent. Partnerships require all partners to sign.

Attach a separate page if there is insufficient space available for all required details. (Late fees apply for Annual Returns)

### **Operational Procedure / Arrangement**

The ICA / CA / IR number and name you are seeking Accreditation/Registration for must be entered here. E.g. ICA23, CA01 etc. Applications without these details will be delayed or not processed. (You may make application for both CA01/(IVCA) and IR01 by ticking the YES box)

#### Applicant Details

- **Type of Ownership** shall be either Individual, Partnership, Incorporated Company, Co-operative Association, Trust or other legal entity. (It may not be a Family Trust).
- Name of the Legal Entity either Individual, Business, Corporation, Association or Trust (if a Family Trust a trustee representing the Trust). Use attachment if insufficient room.
- Address; physical address of business is required
- Partner Names; all partners names must be provided.
- Other Trading Name(s); List any other trading names used. Use attachment if insufficient room.
- ABN / ACN Number; ABN is the Australian Business Number.
- **Convictions**; Need to answer whether you, or any Director of the business or anyone in a Management role been convicted of an indictable offence or offence involving dishonesty in the past five years? This question must be answered. If it is not, the application will not be processed.

### **Facility/ Accreditation Details**

- **Facility Address / Location**; Clearly indicate the location or physical address details where product will be prepared/verified that will enable a PIRSA officer to easily locate the premises. (Usually the registered address of the business).
- Contact: Name and role of the principal contact to be used in regard to the accreditation/Registration.
- **Property Valuation Number and Section and Hundred**; Must clearly indicate the Property Valuation Number, Section and Hundred of the property. These are available from the Council rate notice.
- Postal Address; A mailing address may be provided for posting of all correspondence.

#### Persons Permitted To Sign or Verify Plant Health Certification

- Role; The role of the person able to verify product on behalf of the accredited business.
- Names: The full name and specimen signature of each of these persons.

#### **Product Details**

- **Products Certified / Imported**; Indicate the imported product / equipment / machinery you expect to certify/verify using this procedure.
- Seasonal Operator; Indicate whether seasonal operation will apply and if so what months.
- Consignments per year; Importers to provide estimate number of consignments per year
- Nursery Membership; Nurseries to provide membership details
- States of Origin; Provide a yes for States that product is expected to come from.

#### Product / Certification Assurance Records and Methodology

• Complete only if you wish to maintain records in alternate method to that specified in Procedure.

#### **Authorising / Signing**

The Applicant (individual, all partners or company director/senior manager) must sign acknowledging they represent the business seeking accreditation and the information is accurate. It is an offence under section 51 of the Plant Health Act 2009 to make a false or misleading statement (whether by reason of the inclusion or omission of a particular) in an application made or information provided. Penalties apply.

Separate applications are required for each accreditation / registration. (i.e. ICA, CA, IVCA, Importer etc) see www.pir.sa.gov.au/ica

Please direct queries regarding this Application, Accreditation or Registration to the Market Access Officer on 8207 7814.

Gary Cox,

Manager, Market Access & Systems, Biosecurity SA - Plant Health.

REGISTRATION / ACCREDITATION APPLICATIONISSUE: 3.1Page 3 of 3Objective ID: A526779Date: 14/6/11Attachment 1