

AGRICULTURAL AREAS 1080 BAITING APPLICATION FORM

To enable a Landholder to possess and use a registered 1080 product for vertebrate animal control on leasehold, or freehold land

OFFICE USE ONLY Application No / FRF:	Property CRIS No.:
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➔ Baiting Application – the applicant must be the Owner or Occupier of the land to be baited.

Applicant's name	Status: owner <input type="checkbox"/> occupier <input type="checkbox"/>		
Applicant's Trading Name:			
Telephone No:	Fax:	Mobile:	
Property Address:	Postal Address: P/Code:	Shire:	Total area of property (Ha):

Proposed baiting period: / / to / /

Species (tick one)	<input type="checkbox"/> Rabbits	<input type="checkbox"/> Foxes	<input type="checkbox"/> Wild dogs	<input type="checkbox"/> Feral pigs
Bait area	Length of transect km	Area to be baited ha	Area to be baited ha	Area to be baited ha
Type and brand of bait (tick one)	<input type="checkbox"/> Oat bait (Ready to Lay) <input type="checkbox"/> Rabbait 1080 Oat Bait <input type="checkbox"/> Oat Bait (One shot) <input type="checkbox"/> 1080 Concentrate Blk	<input type="checkbox"/> Fox Bait 3mg/bait <input type="checkbox"/> Impregnated oat 3mg <input type="checkbox"/> 1080 Concentrate Red	<input type="checkbox"/> Wild dog bait 6mg/bait <input type="checkbox"/> Impregnated oat 6mg <input type="checkbox"/> 1080 Concentrate Red	<input type="checkbox"/> Feral pig bait 72mg/bait <input type="checkbox"/> 1080 Concentrate Blk
Quantity of bait				

• Attach a Map of the Property – include points below where relevant and show all distances from bait area

<ul style="list-style-type: none"> Indicate sites or areas not to be baited (shade in); Roads & tracks (indicating those used for baiting) Location of dwellings (own and adjacent) (✕); Proposed locations of all poison warning signs (▲); 	<ul style="list-style-type: none"> Constructed Recreational sites (◆) Access (public and management), highlighting public entry points; Water bodies and water courses. Large properties may also indicate general baiting area (Diagonal hatch)
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Persons nominated to receive and lay 1080 baits in accordance with Poisons (Section 24)(Registered Pesticide 1080) Notice 2000

Nominate the person who will be receiving and / or laying baits in the columns and the number 1, 2 or 3 in the box marked (X)	X	RECEIVER of bait Name/Address	X	LAYER of bait Name/Address
1. Owner/Occupier/Nominee (as Approved by Authorised Dept)				
2. Authorised Department of Agriculture/DEC Officer				
3. Licensed Pest Control Operator				

Should approval be given, the 1080 Authorisation Form to receive baits will be:
 Collected personally or by the nominated receiver, or mailed to Applicant Receiver as above.

Declaration

I, _____ (Print full name)
 of _____ (Property address)
 and being the owner or occupier of the above land state that the above information and the attached map is true and correct and hereby agree that should the use of 1080 products on my property be approved, I will comply with the **Code of Practice for the Safe Use and Management of 1080 in WA** and **Directions of Use for 1080**.

I agree:

1. to display poison bait warning signs on property access points as required
2. to notify neighbours in writing at least 72 hours before baiting is to commence (In aerial baiting programs and other special circumstances, this may be through blanket notification by the Authorising Department)
3. to ensure that baiting will not occur within 150 metres of any dwelling
4. to ensure that 1080 baits are safely secured during transport
5. to ensure that the poison products issued to me, and subject of this application, will be secured and stored in a safe manner and used in accordance with general baiting conditions
6. to comply with any additional conditions imposed by the Authorising Department
7. that all persons engaged by me for the purposes of assisting in the management and operation of the poisoning program will be instructed in the safe handling, storage and use of the 1080 poison and that I will be responsible for their actions in respect of the program

I declare that where necessary I have appointed the nominated person to undertake receipt of the baits.
 I declare that where necessary I have appointed the nominated person to lay the baits for me.
 I declare that after receiving and reading the Department of Agriculture Farmnote, Guide to the Safe Use of 1080 that I will comply with all necessary requirements and baiting conditions contained in that document.

Signature: _____ Date: / /