Supplementary application for Authority to Control or Destroy Game



Additional information required when applying for an Authority to Control or Destroy Game through MyGL

This form requires you to provide information on:

- the species and number of game that you wish to control or destroy (section 4)
- the specific reason for control or destruction of game (section 5)
- your proposed control or destruction method (section 6).

Game is a highly-valued and sustainably managed resource, with frameworks already in place to allow their recreational harvest and management on private property. An authorisation to control or destroy game is not intended to replace the current management of recreational game hunting, and will be assessed in this context. In addition, your application may be assessed by a Game Manager who may inspect the property to confirm the details set out in this application. Under the requirements of the *Wildlife Act 1975*, an Authority to Control or Destroy Game will only be issued if the GMA is satisfied that it is necessary.

If you are seeking to control or destroy game on Crown land, you must have the permission of the Crown land manager.

This form must be completed and attached to your MyGL application.

1. Applicant's residential address		
Property name (Name of house, farm or building if applicable).	Flat/Unit No.	House/Lot No.
street name	City/suburb/town	Postcode
lote: If you intend to engage agent/s to control or de	stroy game, please con	nplete section 7
. Applicant's relationship to the land where the game	e is to be controlled: (Ti	ick ONE box which best describes this)
Land Land Lessee Business owner/director	Employee	e (specify position)
Description and location of land where you plan to	control game	
rown allotment number(s) must be supplied – see your Rates Notice or Shire Office).		are no. & House no, if applicable.
pad location (e.g. no. 2010 Plenty Rd, 2km west of intersection with Centre Rd)		
ostcode Municipality (e.g. Southern Grampians Shire)	Land where game is to b	be controlled or destroyed is either: (tick applicable to
	Private	land Crown land
proximate area in hectares Land use zone	Current land use (e.g. cropping whea	at, cattle grazing, apple orchard, etc)
Species and number of game to be controlled or de	estroyed (based on a co	ount or your best estimate)
Species	Number	
1		
2		
3		
4		

5. Reason for control or destruction of game
Please indicate your reason for control or destruction. (tick one box only)
For the purposes of management, conservation, protection or control of game
For the purpose of education about game
For aboriginal cultural purposes
To ensure the health and safety of any person or class of persons
To support a recognised Game Management Plan
Please provide information that supports your reason indicated above. For example, if you require this authority to support a recognised Game Management Plan, please provide a brief description of the plan and its purpose. You may also want to attach supporting documentation where relevant (i.e. you should attach your Game Management Plan if that is the reason for your application).
6. Control or destruction activities proposed.
Please describe what control or destruction activities you are proposing to implement under this authority. This should include the proposed techniques (e.g. shooting) and the frequency or specific dates that this technique will be implemented (e.g. twice weekly or ad hoc).
What other management activities have been used previously? Note: for many control or destruction techniques the applicant will require other licences or permits (e.g. a Firearm Licence). It is the responsibility of the applicant
and/or agent(s) to ensure that they have the required licences or permits.

7. A	gent/s c	details		
	Mr/Mrs/Ms	Full name	Date of birth	Residential address
1)				
	Mr/Mrs/Ms	Full name	Date of birth	Residential address
2)				
	Mr/Mrs/Ms	Full name	Date of birth	Residential address
3)				
	Mr/Mrs/Ms	Full name	Date of birth	Residential address
4)				
	Mr/Mrs/Ms	Full name	Date of birth	Residential address
5)				
	Mr/Mrs/Ms	Full name	Date of birth	Residential address
6)				
	Mr/Mrs/Ms	Full name	Date of birth	Residential address
7)				
	Mr/Mrs/Ms	Full name	Date of birth	Residential address
8)				
	Mr/Mrs/Ms	Full name	Date of birth	Residential address
9)				
	Mr/Mrs/Ms	Full name	Date of birth	Residential address
10)				
	Mr/Mrs/Ms	Full name	Date of birth	Residential address
11)				
	Mr/Mrs/Ms	Full name	Date of birth	Residential address
12)				
	Mr/Mrs/Ms	Full name	Date of birth	Residential address
13)				
	Mr/Mrs/Ms	Full name	Date of birth	Residential address
14)				
	Mr/Mrs/Ms	Full name	Date of birth	Residential address
15)				