

# Poison Use Statement – Human Consumption

Effective from July 2022

Ministry for Primary Industries  
Manatū Ahu Matua



This statement is made for the purposes of clause F2.12 and F2.13 the Animal Products Notice: Production, Supply and Processing.

**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 <b>Group 1 Poisons (Zinc phosphide, para-aminopropiophenone, sodium nitrite, or any other poison not covered in groups 2 to 4 (except sodium cyanide, potassium cyanide or cholecalciferol)).</b> Over the last <b>month</b> to the best of your knowledge have any of these poisons been laid in the area of land covered by this statement? | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.2 <b>Group 2 Poisons (Pindone, diphacinone).</b> Over the last <b>2 months</b> to the best of your knowledge have any of these poisons been laid in the area of land covered by this statement?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.3 <b>Group 3 Poisons (1080, coumatetralyl).</b> Over the last <b>4 months</b> to the best of your knowledge have any of these poisons been laid in the area of land covered by this statement?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.4 <b>Group 4 Poisons (Brodifacoum, flocumafen, bromadilone, difenacoum, difethialone).</b> Over the last <b>3 years</b> to the best of your knowledge have any of these poisons been laid in the area of land covered by this statement?  | <input type="checkbox"/> | <input type="checkbox"/> |

### 2. 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	Method used to lay poison, e.g. bait bag, bait station, aerial, under farm buildings etc	For <b>Groups 1, 2 and 3 Poisons</b> were the poisons laid so as to be inaccessible to the hunted animals? (see note 4) Yes/No

### 3. Future Poisoning Activities

- |   | Yes                      | No                       |
|---|--------------------------|--------------------------|
| 3.1 Do you intend to lay poisons in the area of land covered by this statement within the next 3 months?    | <input type="checkbox"/> | <input type="checkbox"/> |
| 3.2 If you answered <b>yes</b> to question 3.1, please fill in the details here for each poison to be laid. |                          |                          |

Name of poison	Date poison to be used	Geographic location where each poison will be laid	Method used to lay poison, e.g. bait bag, bait station, aerial, under farm buildings etc	For <b>Groups 1, 2 and 3 Poisons</b> will the poisons be laid so as to be inaccessible to the hunted animals? (see note 4) Yes/No

Name of listed hunter: \_\_\_\_\_

*I agree to notify **any changes** to this statement that may occur within the three months from the date of signing to the listed hunter named above, 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.*

Responsible person signature: \_\_\_\_\_ Date: \_\_\_\_\_

**This statement has effect for 3 months from date of signing, unless replaced.** 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 some other 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. It must include the farm address, if this is different to the physical address. 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:

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

Poison group	1	2	3	4
<b>Poison</b>	<ul style="list-style-type: none"><li>• Zinc phosphide</li><li>• Para-aminopropiophenone</li><li>• Sodium nitrite</li><li>• Any other poison not covered in groups 2 to 4 (except sodium cyanide, potassium cyanide and cholecalciferol)</li></ul>	<ul style="list-style-type: none"><li>• Diphacinone</li><li>• Pindone</li></ul>	<ul style="list-style-type: none"><li>• Coumatetralyl</li><li>• 1080</li></ul>	<ul style="list-style-type: none"><li>• Brodifacoum</li><li>• Difethialone</li><li>• Bromadiolone</li><li>• Flocoumafen</li><li>• Difenacoum</li></ul>
<b>Caution period (all species)</b>	1 month	2 months	4 months	3 years
<b>Buffer zone</b>	<b>Rabbits</b>	0 m	200 m	200 m
	<b>Hares, tahr, wallabies, and possums</b>	0 m	1 km	1 km
	<b>Goats, chamois, deer and buffalo</b>	0 m	2 km	2 km
	<b>Pigs and other species</b>	0 m	2 km	2 km

### 4. Non-Accessible poisons

If poisons are not accessible to the hunted animals, the responsible person needs to indicate this in questions 2 and 3.2.

As stated in clause F2.9 of the Animal products Notice: Production, Supply and Processing, a listed hunter may present hunted animal material procured from poisoned land or buffer zone land for primary processing if:

- the animal is not a pig; and
- the relevant land was not administered by the Department of Conservation; and
- all poisons used were:
  - poisons in group 1, 2 or 3 of the applicable Table; and
  - used solely in bait stations that were correctly situated and used; or
  - used solely in buildings that could not be accessed by the applicable animal; or
  - otherwise inaccessible to the animal due to impassable geographical features (such as rivers, sea, cliffs or steep ravines); and
  - cliffs or steep ravines); and
- 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:

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

If the responsible person has any reason to believe that the poisons could be accessed by the animals, he or she must answer 'no' to the applicable questions.

### 5. Electronic Submission.

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