

Registration as a Postal Operator

DECLARATION BY INDIVIDUAL OPERATORS, DIRECTORS AND CHIEF EXECUTIVES

This form must be completed by every director and chief executive of an organisation or individual wishing to become registered as a postal operator. It must either accompany the PO1 form ("Application for Registration as a Postal Operator") or be sent separately to:

The Manager
Telecommunications and Postal Policy Group
Ministry of Economic Development
PO Box 1473
WELLINGTON.

Tel. 04-462 4267
Fax 04-499 0969

This information is required under Part 3 of the Postal Services Act 1998, before an application for registration as a postal operator can be considered. The information is required in order to assess whether registration as a postal operator should be granted, providing the details necessary for registration and allowing the Ministry to contact applicants if further information is required. The names of directors, chief executives and individual postal operators will be made publicly available. All information submitted to the Ministry is subject to the provisions of the Official Information Act 1982. Any information on this form may be provided to the Police, the Department for Courts, the New Zealand Customs Service or any other agency for verification purposes. The Ministry is unable to process applications until a completed PO2 form has been received from every director and chief executive of a prospective postal operator or an individual operator.

The information in this statement will be held by the Ministry of Economic Development, 33 Bowen Street, PO Box 1473, Wellington, New Zealand. You may access and correct this information at the Head Office of the Ministry, or an office of the Ministry notified in the *Gazette*.

Applicants should complete Part A and Part B of this form and sign Part C and Part D.

Under the Postal Services Act 1998 it is an offence punishable by fine of up to \$10,000 to provide false or misleading information or documentation in support of an application for registration as a postal operator.

PART A: GENERAL

Name of postal operator: _____
(the company, organisation or individual seeking registration)

Name of person completing this form: _____

Contact telephone number: _____

PART B: CRIMINAL CONVICTIONS

In the last ten years, have you been convicted of any of the following:

- a crime involving dishonesty within the meaning of s. 2 of the Crimes Act 1961, including:
 - (i) theft;
 - (ii) conversion; criminal breach of trust; &c.;
 - (iii) robbery or extortion;
 - (iv) burglary;
 - (v) obtaining by false pretences or obtaining credit fraudulently;
 - (vi) impersonation;
 - (vii) fraud;
 - (viii) money laundering;
 - (ix) receiving;
 - (x) forgery;
 - (xi) coinage offences?;
- an offence against any of the following sections of the Misuse of Drugs Act 1975:
 - (i) s. 6 (which relates to dealing with controlled drugs); or
 - (ii) s. 7 (which relates to the possession and use of controlled drugs); or
 - (iii) s. 9 (which relates to the cultivation of prohibited plants); or
 - (iv) s. 12 (which relates to the use of premises or vehicles for the commission of an offence)?;
- an offence against ss. 20, 23 or 24 of the Postal Services Act 1998; or ss. 11, 14 or 15 of the Postal Services Act 1987 (which relate to the wrongful divulgence of information from or as to the contents of a postal article; unlawfully opening a postal article; or posting a dangerous enclosure)?;
- any offence against the law of any foreign country, where the offence consists of or includes conduct that, if it occurred in New Zealand, would be an offence against one of the sections listed above?

YES / NO

Answering "yes" to this question does not necessarily mean that your application for registration as a postal operator will be declined. If the answer is "yes", you are asked to provide details of the relevant conviction(s): (Continue on a separate sheet if necessary).

PART C: DECLARATION

I, _____ of _____
(name) (place of abode and occupation)

solemnly and sincerely declare that the above statements are true. And I make this solemn declaration conscientiously believing the same to be true and by virtue of the Oaths and Declarations Act 1957.

Signature: _____

Declared at _____ this _____ day of _____ 20_____
(place) (date) (month) (year)

Witnessed by: _____

[person authorised to witness statutory declaration by the Oaths and Declarations Act 1957. Such persons include Justices of the Peace, solicitors of the High Court of New Zealand etc.]

Designation of witness: _____

PLEASE COMPLETE PART D OVER PAGE

PART D: CONSENT TO DISCLOSURE FORM

To: the New Zealand Police, PO Box 3017, Wellington

I,
(Surname) (Fore Names)

.....
(maiden or any other names used)

Sex (M/F) Date and place of birth

Nationality Address.....

NZ Drivers Licence number

hereby consent to the disclosure by the New Zealand Police of any information they may have pursuant to this application, to the Ministry of Economic Development. I understand that any record of criminal convictions I might have will automatically be concealed if I meet the eligibility criteria stipulated in Section 7 of the Criminal Records (Clean Slate) Act 2004.

Signed Date

COMMENTS OF NEW ZEALAND POLICE