

## Milk Production Loss Compensation Claim Form

### *Mycoplasma bovis* Programme

**What is this form for?** Use this form if you are:

- A person or business who is the legal owner of:
  - property or goods that were destroyed or damaged, or
  - goods that were affected by movement restrictions,
 as a direct result of an exercise of powers authorised by the Ministry for Primary Industries (MPI).

**Form Layout**

1. Your Details
2. Tell Us About Your Claim
3. Supporting Your Claim
4. Useful Information

**Important information**

1. You can return the form and all supporting documents as email attachments or post to MPI Compensation at the address at the bottom of this form (under 'Useful Information').
2. If you need more space to answer a question, write "see attached" and you can write your answer on a separate sheet of paper.
3. Make sure you attach all the supporting documents.
4. Please refer to [DBCAT's M. bovis Compensation Guide for Farmers](#) to help you with this application. The guide is available at [www.mbovis.govt.nz](http://www.mbovis.govt.nz)

## Part 1: Your details

<b>Name</b> (Company director if the claimant is a business)			
<b>Full postal address</b> (Include street number and RD)			
<b>City/Region/Province</b>		<b>Postcode</b>	
<b>Trading name</b> (If applicable)			
<b>Email</b>		<b>Telephone</b>	
<b>Preferred method of contact</b>	<input type="checkbox"/> Telephone <input type="checkbox"/> Email		

### Your bank details

If this is your first claim or your bank details have changed, please attach either:

- a bank deposit slip,
- a screen shot of your account, or
- some other proof from your bank confirming your account name and number.

<b>Bank Account Number</b>		<b>Bank Account Name</b>	
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## Are you GST registered?

- Yes (please use GST exclusive prices in Part 2 of this form)  
 No (please use GST inclusive prices in Part 2 of this form)

GST Number (if applicable)	
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## Is someone else acting on your behalf?

Only complete this section if you wish someone else (an agent) to act on your behalf.

Name			
Email		Telephone	
Preferred method of contact	<input type="checkbox"/> Telephone <input type="checkbox"/> Email		
DBCAT (DairyNZ, Beef + Lamb New Zealand Compensation Assessment team)	(number/s)		

## Part 2: Tell us about your claim

### The details of your loss/damage

To help us better understand and assess your claim can you describe how you calculated your loss.

*Note: Please format any dates as DD/MM/YYYY.*

#### **Example only**

*Forty of my spring-calving cows were destroyed mid-season while in-milk due to NOD 123.*

*I've calculated my losses for these animals by taking the total herd performance in each month, divided by the number of cows milked into the vat in each month, multiplied by the forty cows. I expect that this will then be multiplied by Fonterra's (my milk supplier) end of season milk price, less costs and mitigating income (e.g. feed).*

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**TOTAL AMOUNT CLAIMED (if applicable):**

### Your farming business

Additionally, please describe your normal farming business operations.

#### **Example only**

*I have a dairy operation with 400 cows, replacement herd grazed off farm and all calves transported from the property after reaching 100kg.*

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## Your timeline of events

Please fill in the timeline of events boxes below, starting with the first contact from MPI and what happened as a direct result of this.

When did MPI contact you?	What did MPI do?	Section of The Biosecurity Act 1993 (the Act) that MPI exercised its powers under? If you aren't sure, write "not sure".	What happened?	What <u>would</u> have happened if MPI hadn't exercised its powers?
<i>Example only</i> 30/09/2019	<i>Example only</i> Notice of Direction (NOD) 123	<i>Example only</i> Section 121 of the Act	<i>Example only</i> As a result of the destruction of my dairy herd on 456 Charles Fergusson Road, Wellington (the property), I have had reduced milk production revenue.	<i>Example only</i> I would have milked this herd and had the revenue from this.

## Your avoided costs

Please list any costs you would normally have incurred in producing additional milk on your farm, and/or milking additional cattle, but have avoided due to your loss/damage.

<p><i>Example only</i> Animal health, breeding, grazing, fertiliser, dairy shed costs, shed electricity, fuel, levies, seasonal wages, feed.</p>
Empty space for user input

## What actions have you taken to minimise your loss?

The Act requires you to have taken reasonable steps to minimise or avoid your losses. Please describe what (if any) steps have been taken to minimise the impact on your business or why your farm was unsuitable to mitigate the impact of your losses (and provide supporting documents).

<i>Example only</i> <i>Harvesting and selling silage</i>

## Have you received any other payments from MPI that are related to this claim?

- No  
 Yes (please provide further detail of any payments below)

Payment Amount	Date Paid	What was the payment for?
<i>Example only</i> \$25,000.00	25/10/2020	Contractor harvesting sileage

## Other documents you need to provide in support of your claim

To help MPI to process your claim quickly, there are some documents we need from you to verify your claim. A list of this information can be found in Part 3.

## Declaration (to be completed by the claimant or company director)

I am the legal owner of the property or goods to which this claim applies or have the claimant's authority to sign. I have answered all the questions that apply to me and my application and the information I have provided is true and correct. I authorise MPI to give or obtain information from any other party any other information that in MPI's view is relevant to verifying and/or assessing this claim.

I authorise MPI to pay the assessed amount into the bank account provided with this application.

Your name (print)	Your signature	Date (DD/MM/YYYY)

## Agent to complete (if applicable)

I have completed this form at the request of the person claiming. The information included in this claim has been provided to me by the claimant and/or has been reviewed by them and confirmed as true and correct.

Your name (print)	Your signature	Date (DD/MM/YYYY)

## Part 3: Supporting your claim

Complete this checklist to make sure we have all the information we need to process your Milk Production Loss claim quickly.

1. Please provide relevant details and any related documentation on the following:
  - a copy of your calculation of loss
  - copies of monthly milk statements (Fonterra, Oceania etc.) - these need to be the full statement with all details itemised, not the summary
    - for a partial cull, these will only need to be for the claim year to date
    - for a full cull or other impacts, these need to be for both the claim year to date and the entire previous milking season (including any retrospective statements)
  - copies of agreements such as VOSM or HOSM or any other share milking agreements detailing the percentage of milk revenue you are entitled to
  - a monthly cash flow report (from an accounting system) for the last year and the claim year to date (and if possible, an Excel workbook showing this information)
  - copies of end of year or end of season financial transaction reports
  - approximate monthly number of "Cows to the Vat" reports for the last year and the claim year
  - copies of any documentation or calculations you have for avoided costs and mitigation of losses.
2. And where applicable, please provide the following additional information:
  - copies of agreements with milk companies for special premiums for the claim year e.g. winter milk premiums, A2 milk premiums
  - copies of any other information on 'business as usual' practice for high cost items such as feed, fertiliser, grazing and wages
  - an outline and any supporting documentation for increased milk production.

Once you have sent through your claim, you will receive an email confirming that all information has been received and an assessment will start shortly.

If you send us a claim without providing all the details and documentation required to support the claim, we'll let you know. You'll then have **20 working days** from our notification to provide the information before we look at closing the claim.

If your claim is closed and you wish to re-apply, you'll just need to complete a new claim form and attach the missing information we asked for when you sent us the original claim. You won't need to resubmit any documentation that you provided to support your original claim.

If you're unable to provide the information we've asked for, please get in touch with us as soon as possible.

## Part 4: Useful information

### Where can you get help?

DBCAT is a free service supported by MPI and run independently by DairyNZ and Beef + Lamb New Zealand.

They are available to help you:

- understand whether you are eligible for compensation
- clarify what losses you can claim for
- help you put together your claim
- support you through the compensation claim process.

### Contact information:

- Telephone: 0800 32 22 81
- Email: [admin@dbcats.co.nz](mailto:admin@dbcats.co.nz)

### Biosecurity Act 1993

The Act provides the legal framework for MPI and others to help keep harmful organisms, such as *Mycoplasma bovis*, out of New Zealand. Compensation may be paid under section 162A of the Act where a person has suffered loss as a result of MPI's exercise of powers under the Act in order to control and eradicate the organism.

Compensation payments are based on showing that your loss was caused as a direct result of MPI exercising powers on your property or goods.

You can claim compensation if:

MPI has exercised powers to eradicate or manage a harmful organism.

- That has caused you to incur a loss, because either:
  - the loss was caused by the damage or destruction to your property, or
  - the loss was caused by movement restrictions imposed on your goods.
- The loss can be verified (complete Part 3: Supporting your claim).

Compensation cannot be paid if losses were incurred:

- Before MPI's exercise of powers commenced
- More than one year before the claim was submitted
- Because you have failed to comply with the Biosecurity Act
- Because your goods are unauthorised or uncleared.

## Requesting a re-assessment

Receiving a full or part payment from MPI does not prevent you seeking a re-assessment of your claim. Once payment is made, you may request a re-assessment up to 12 months after you have received payment.

You will need to complete and submit an application for re-assessment form. This is available either on the MPI website, or by contacting the Compensation Coordinator. We'll be happy to email one to you.

Once you have completed the application for re-assessment form, you can email one or send it by post/courier to MPI's compensation team, along with supporting documentation

## Privacy Act 1993

Please refer to [MPI's website](#) for information on our Privacy Policy.

## Official Information Act 1982

MPI is subject to the Official Information Act 1982 (OIA) and may be required to disclose information regarding this claim in accordance with its obligations under the OIA.

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## MPI Compensation Contact Information

For general information or to send your claim form please contact the MPI Compensation Coordinator:



0800 00 83 33



compensationcoordinator@mpi.govt.nz



[www.mbovis.govt.nz](http://www.mbovis.govt.nz)



Ministry for Primary Industries  
Attention: Compensation Coordinator  
PO Box 2526  
Wellington 6140



Ministry for Primary Industries  
Attention: Compensation Coordinator  
Charles Fergusson Building  
34-38 Bowen Street  
Wellington 6011

*Note: MPI is unable to provide legal or business advice to claimants.*