**Good Manufacturing Practice (GMP) Certificates:   
Request for Additional Copies**

**ACVM 19 (August 2021)**

* Send this completed form electronically to [ACVM.ManufacturingandAssurance@mpi.govt.nz](mailto:ACVM.ManufacturingandAssurance@mpi.govt.nz)
* Refer to the Privacy Act 2020 and Official Information Act 1982 notices at the end of this form regarding collection of information by MPI.

**Processing time for this request is 5 - 10 working days.**

|  |  |
| --- | --- |
| **Manufacturer’s name** |  |
| **New Zealand Business Number (NZBN)**  For more information on NZBNs, see [www.nzbn.govt.nz](http://www.nzbn.govt.nz) |  |
| **Physical manufacturing site address(es)** |  |
| **Current Certificate number** |  |
| **Contact person** |  |
| **Phone number** |  |
| **Email address** |  |
| **Active billing details**  Provide the current accounts payable email address to which invoices should be emailed. |  |
| **Return postal address** |  |
| **Number of copies requested** |  |

|  |
| --- |
| **Use this space for additional comments or details if necessary** |
|  |

|  |  |
| --- | --- |
| **Name** |  |
| **Signature** |  |
| **Date** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| MPI Service Charge | | | |
| ON PAYMENT THIS BECOMES A TAX INVOICE  GST No.: 64-558-838  BASE FEE: **$155.25** (inc. GST) for 1-10 copies of certificate  **ADDITIONAL FEE** if requesting more than 10 copies:  11-20 copies requested at the same time = $12.00  21-30 copies requested at the same time = $24.00 etc.  **PAYMENT OPTIONS:**  **MPI does not accept cash**. Payment must be made using one of the following methods below (please complete the appropriate section). | | | |
| **APPROVED CREDITOR**  **Customer Number:** Click or tap here to enter text. | | | |
| **CREDIT CARD**  Go to <https://www.mpi.govt.nz/food-safety/payments> and follow the instructions.  I have attached my credit card receipt | | | |
| **DIRECT CREDIT**   1. Pay into Bank Account no.: **03 0049 0001709 002** 2. In the ‘Reference’ details, put the code: **GMP CERT**   Enter the date of deposit and the payer name below: | | | |
| **Date of Deposit** | Click or tap to enter a date. | **Payer Name** | Click or tap here to enter text. |

|  |
| --- |
| Collection of Information |
| **Collection of Personal Information**  Pursuant to Principle 3 of the Privacy Act 2020, we advise that:   * This information is being collected for the purpose of providing Good Manufacturing Practice certification under the ACVM Act; and * The recipient of this information, which is the agency that will collect and hold the information, is the Ministry for Primary Industries, PO Box 2526, Wellington 6140; and * The collection of information is authorised under section 10 of the ACVM Act; and * The provision of this information is necessary in order to process this application; and * The supply of this information is voluntary; and * Failure to provide the requested information is likely to result in the application being declined; and * Under Principles 6 and 7 of the Privacy Act 2020, you have the right of access to, and correction of, any personal information which you have provided.   **Collection of Official Information**  All information provided to the Ministry for Primary Industries is official information and may be subject to a request made under the Official Information Act 1982. If a request is made under that Act for information you have provided in this declaration, the Ministry for Primary Industries will consider any such request, taking into account its obligations under the Official Information Act 1982 and any other applicable legislation. |