# 38 Nature Stewardship

Nature

## Submission information

Provide the following information for the submission

|  |  |
| --- | --- |
| **Submission type** | Choose an item. |
| **Performance level targeted** | [ ]  Credit Achievement |
| **Points Targeted** | Click or tap here to enter text. |

#### Technical Questions

|  |  |
| --- | --- |
| There are project-specific technical questions for this credit and all responses received from the GBCA are included in the submission. | Choose an item. |

#### Discussion

Narratives will help the Assessors understand how the project complies with the credit. Please include a narrative below, but note that simply listing the credit requirements is not helpful. Instead, outline any other issues that need to be considered by the Assessment Panel.

Click or tap here to enter text.

#### Changes between Rounds

If applicable, please use the text box below to explain any changes between Round 1 and Round 2. This is an opportunity for the GSAP to describe how they have addressed the Assessors comments in Round 2.

Click or tap here to enter text.

## Submission template

### Credit Achievement

#### Area of Restoration or Protection

|  |  |
| --- | --- |
| **Enter the area of restoration.** | Click or tap here to enter text. |
| **Enter the total GFA of the development.** | Click or tap here to enter text. |
| **Enter the total site area.** | Click or tap here to enter text. |

#### Supporting documentation

Identify where evidence supporting the information provided can be found in the documentation.

|  |  |  |
| --- | --- | --- |
| Document name | Document description | Page number(s) |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

#### Location of Restoration or Protection Activities

|  |  |
| --- | --- |
| **Land for restoration is in New Zealand and restored to equivalent an indigenous functioning ecosystem of the site before any development occurred.** | Choose an item. |
| **The location of the land designated for the offsite restoration is not in the development boundary.** | Choose an item. |
| **Outline the ecologist's confirmation of the ecological value.**Click or tap here to enter text. |
| **Land being claimed for restoration and protection activities is not being double counted for multiple buildings or other activities.** | Choose an item. |

#### Supporting documentation

Identify where evidence supporting the information provided can be found in the documentation.

|  |  |  |
| --- | --- | --- |
| Document name | Document description | Page number(s) |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

#### Activities to Protect or Restore

|  |  |
| --- | --- |
| **A Restoration or Protection Management Plan has been prepared by an experienced ecologist.** | Choose an item. |
| **Indicate where the following requirements have been included in the plan (provide references to documentation):** |
| * What site was chosen and evidence of its purchase
 | Click or tap here to enter text. |
| * Why the project chose the site, with details on ecological value
 | Click or tap here to enter text. |
| * How the site for restoration will be equivalent in ecological value to the site prior to development
 | Click or tap here to enter text. |
| * Validation of the offsite restoration approach by a suitably qualified independent ecologist or similar professional
 | Click or tap here to enter text. |
| * The timeframes for protection or restoration
 | Click or tap here to enter text. |
| * Commitment to set-aside and manage the site land in perpetuity including on-going funding provision
 | Click or tap here to enter text. |
| * How the design contributes to ‘‘Te Mana o te Taiao – Aotearoa New Zealand Biodiversity Strategy’ and other current indigenous and biodiversity strategies and policies.
 | Click or tap here to enter text. |
| **Outline how the restoration actions were beyond any legislated requirements and resulted in an outcome that wouldn't have happened otherwise.**Click or tap here to enter text. |
| **A partnership for restoration activities was funded for at least five years.** | Choose an item. |
| **Outline how the area for restoration will be equivalent, or greater, in ecological value of the site before any development occurred, as well as meeting the minimum size requirements.**Click or tap here to enter text. |
| **Provide evidence of an independent third party verification of the restoration activities.** | Click or tap here to enter text. |
| **Outline how the restoration actions were beyond any legislated requirements and resulted in an outcome that wouldn't have happened otherwise.**Click or tap here to enter text. |

#### Supporting documentation

Identify where evidence supporting the information provided can be found in the documentation.

|  |  |  |
| --- | --- | --- |
| Document name | Document description | Page number(s) |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

#### Legislated Requirements

|  |
| --- |
| **Outline any biodiversity offsets, land restoration, land restoration investments, or similar, required as part of an EPBC action, development approval, or other legislated requirements.**Click or tap here to enter text. |

#### Supporting documentation

Identify where evidence supporting the information provided can be found in the documentation.

|  |  |  |
| --- | --- | --- |
| Document name | Document description | Page number(s) |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

## Declaration

Provide the following details as confirmation that the information provided in this document is truthful and accurate at the time of completion.

|  |  |
| --- | --- |
| **Name** | Click or tap here to enter text. |
| **Position** | Click or tap here to enter text. |
| **Email** | Click or tap here to enter text. |
| **Date** | Click or tap to enter a date. |