

FORM-R2

(See clause (e) of sub-rule (1) of rule 10 and sub-rule (2) of rule 15)

Post-Visit Report

On Permit issued to enter Antarctic Specially Protected Area/ Marine Protected Area/Historic Site and Monuments

1. Title of Antarctic Expedition: _____
2. Total period of participation: _____
3. Season: Austral Summer Winter
4. Project Number (if relevant): _____
5. Particulars of Permit Holder:
 - a. Name of Applicant: _____
 - b. Organisation: _____
 - c. Designation: _____
 - d. Postal address: _____
 - e. Email address: _____
 - f. Telephone/Mobile number: _____
 - g. Website: _____
 - h. Nationality: _____
6. Period of Permit for Antarctic Specially Protected Area/Marine Protected Area :

7. Name of Protected Area for which Permit granted:

8. Period of Permit: _____
9. Purpose of visit to the Area under the current Permit:

10. List of dates of entry, duration of visit, and all persons who entered the Area under the current Permit:

Date and duration of the visit(s)	Names of persons

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11. Was the activity undertaken within the mentioned permit period: Yes No
If No, provide further information if carried out any part of the activity beyond the permit period:

12. Was the sample collected according to Permit: Yes No
If No, add further information if samples collected other than authorised:

13. Mode of transport/approach within the Area Foot/vehicle/snow mobile/helicopter/other, mention:

14. Did any personnel not listed in the permit but assisting as support staff undertake the activity (or part thereof): Yes No

15. If yes, please explain the circumstances. If support staff has been taken to ASPA along with permitted members:

16. Whether performed activity in other restricted/prohibited Area other than permitted: Yes No
If, yes explain the circumstances:

17. Describe activities conducted in the Area, including impacts on the habitats and remedial action taken, where applicable:

18. Sampling activities conducted within the Area:
Ensure you provide sufficient detail describing the following:

- a. Gathering, collecting, injuring or otherwise interfering with any native flora.
- b. Killing, taking, injuring, disturbing or otherwise interfering with any native birds or seals (including the collection of any dead specimens, bones or eggs).
- c. Taking, or impacting the habitat of any native invertebrates.
- d. Gathering and collecting rocks, meteorites, water, sediment, snow, soil samples.

Type of sample	Number /Species/ quantity of samples collected	Location (within the ASPA) where the samples were collected	Weight of the sample (grams/kg)	Volume of sample (ml/litre)	Size of the sample (LxBxH) c.m.	Other Samples

19. Describe any measures taken during this visit to ensure compliance with the Antarctic Specially Protected Area/Marine Protected Area Management Plan that was difficult or impractical. Were there any activities that did not comply with the Management Plan?

20. Attach a copy of the map of the Area showing the location of activities performed under this permit (as applicable) - campsite location(s) land/sea/air movements or routes, sampling sites, installations, deliberate or accidental release of materials, any other impacts, and features of special significance not previously recorded:

21. Provide descriptions and locations of markers, instrumentation or equipment installed and/or removed, or any material released into the environment (noting how long these are intended to remain in the area). Please include information about any unlabeled materials you observed that may have been left by other parties:

Signature of Permit Holder:_____

Name :_____

Date:_____ Place:_____

If space provided in the application to submit required information is not sufficient, may attach a separate sheet