

CARE GROUPS ACTIVITY WORK RECORD

Form CG6

Care Group name: Mauao Care Group File No.
 Project name: Community Working Bee
 Activity: Planting along old track and targeting Boneseed on the summit.
 Task: Plant along old track to discourage use Date: 10/010/07
 Environment Bay of Plenty staff member: Present: Yes/**No**
 Hazards identified and volunteers signed off..... **YES** / NO

Time and duration of activity: 10am – noon. 2 hours.....

Location: Mauao.....

Landowner: Tauranga City Council.....

Volunteers present:

Action Education s 7(2)(a) - Privacy [redacted]
s 7(2)(a) - Privacy [redacted]
s 7(2)(a) - Privacy [redacted] + 13 others) + NZ Housing (s 7(2)(f)(ii) [redacted])
s 7(2)(f)(ii) [redacted]
s 7(2)(f)(ii) [redacted]) + Mauao Care Group (s 7(2)(a) - Privacy [redacted]) +
s 7(2)(f)(ii) [redacted]

Work done: We had a large turn out with Action Education and Housing New Zealand coming along plus also a few of the care group members. Some of the volunteers planted around 150 plants on the South facing slope where a track has been cut through the bush by people seeking a shorter route to the summit. The plants were planted to block the entrance to the track and make it obvious that it cannot be used in the future. While this was being done other volunteers worked on the summit at targeting the Boneseed that has started to flower. All in all a good day with lots of work done even in the pouring rain! .

Total volunteer hours worked: 52 x 2 = 104 hours.....

Materials used:

Material (e.g. plants, posts, wire, herbicide)	Quantity	Funded by	Cost (if known)
Plants	150	TCC	
Fertiliser		TCC	

Notes for next stage: Continue to work in teams when there is sufficient numbers, splitting into groups to work on different areas of Mauao. Targeting all invasive weed species including but not limited to: Pampas, Privet, Ginger, Smilax and Woolly Nightshade. Chris to Organise with Mark the dates for the summer months working bees.

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Incident:

- Incident/accident occurred Yes/No
- Incident forms filled out
- Incident forms sent to Environment Bay of Plenty Date:

- Checklists attached No
- Photographs attached No
- First Aid kit replacement items requested Yes/No

Signed:

Print name: [redacted] on behalf of [redacted]

