

## Appendix 11 - Annual CCA Reporting Form



Department of Environmental Protection and Conservation  
COMMUNITY CONSERVATION AREA (CCA)



### Annual Reporting Form

**Instructions:**

1. Print clearly
2. Answer all questions
3. Refer to the CCA Information Package for clarification or more information

Today's date:

#### CCA Information

1. Full name of CCA:		Traditional name of CCA (if any):	
2. CCA Location	Village/Community:	Island:	Province:
3. Date of official CCA registration:	Day:	Month:	Year:

#### Changes since registration/last annual report

4. Has the structure of the CCA Management Committee/Coordinating Body changed? <input type="checkbox"/> YES <input type="checkbox"/> NO If Yes, describe:			
5. Has the CCA contact information changed? <input type="checkbox"/> YES <input type="checkbox"/> NO <small>If Yes, provide new contact information below:</small>			
New Contact Information:	Land Line:		Mobile:
	Mailing Address:		
	Email Address:		Website:
6. Have the following changed? <small>(tick where appropriate; and attach copies)</small>	<input type="checkbox"/> Management Plan, if Yes <input type="checkbox"/> Finalized <input type="checkbox"/> Updated <input type="checkbox"/> Drafted Date Changed:	<input type="checkbox"/> CCA Usage Rules, if Yes <input type="checkbox"/> Finalized <input type="checkbox"/> Updated <input type="checkbox"/> Drafted Date Changed:	<input type="checkbox"/> Customary Regulations, if Yes <input type="checkbox"/> Finalized <input type="checkbox"/> Updated <input type="checkbox"/> Drafted Date changed:
7. Has the CCA changed size? <input type="checkbox"/> YES <input type="checkbox"/> NO <small>If Yes, describe, specify measurement units and attach new map:</small>			

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[Type text] [Type text]

[Type text]

8. Have the CCA objectives changed?

YES  NO  
(If Yes, list NEW objectives)

9. Have the CCA management activities changed?

YES  NO  
(If Yes, list NEW activities)

10. Have the CCA habitats and ecosystems changed?

YES  NO  
(If Yes, list NEW habitats/ecosystems)

11. Have any NEW nationally significant species (endangered, threatened, vulnerable, rare or endemic) been observed/recorded in the CCA?

YES  NO  
(If Yes, list NEW species)

**Changes** (continued)

12. Have the human activities that occur regularly within the CCA changed?

YES  NO  
(If Yes, list NEW activities)

13. Have the threats affecting the CCA changed?

YES  NO  
(If Yes, list NEW threats)

14. Are there any NEW disputes or other conflicts within/regarding the CCA?  
If Yes, describe in detail:

YES  NO

15. Has any NEW research or surveys been carried out in the CCA?  
and/or attach documentation and reports:

YES  NO If Yes, describe

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[Type text] [Type text]

[Type text]

16. Have there been any NEW expressions of commercial interests within the CCA?  YES  NO

If Yes, describe and provide names of organization or company and their details:

17. Has CCA management committee/coordinating body worked with any other outside groups apart from those already listed in the application form?

Government Departments:

NGOs:

Others:

18. Describe any technical support and/or funding received by the CCA since registration or the last annual report:

## Assessment

19. Describe the current state of CCA management:

20. Does the community perceive that resources within the CCA are increasing or decreasing?

Describe and give specific examples:

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**Assessment** *(continued)*

21. Describe any CCA Management Plan goals and objectives that are not being carried out, and explain why:

22. Describe any unplanned activities (not in Management Plan) that are occurring within and/or affecting the CCA, and explain why:

23. Additional comments regarding progress and/or challenges to the management of the CCA:

\*\*Please attach any other relevant information that will assist the DEC to evaluate the progress of this Community Conservation Area.

**Reporter Information**

Name of person completing CCA Annual Report:

Position/Organization:

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[Type text] [Type text]

[Type text]

## Endorsements

\*\* At least Four (4) signatures are required on this form: Two (2) from the CCA Management Committee/Coordinating Body

Two (2) from the Community Governing Body

**We, the undersigned, certify that the information provided in this CCA Annual Report is complete and accurate**

Name	Position/Organization	Signature	Date

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