Submission on

Resource Consent Application

Form 13

Under Section 96 of the Resource Management Act 1991.



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A copy of your submission must also be given to the resource consent applicant as soon as possible. All information provided in your submission is available to the public (on request).

| 1. Person m | aking submission | | | |
|------------------------|-------------------------|--------------------------------|----------------------------------|-------------------------------|
| Name in full: Address: | Surname: | | First Name(s) | |
| No. | Street/Road | | | Suburb |
| Town/City | | | | Postcode |
| Mobile: | | | Other phone: | |
| Email: | | | | |
| 2. Submissi | on on | | | |
| Application No |): | | | |
| Name of appli | cant: | | | |
| Type of resour | ce consent applied fo | r: | | |
| Brief description | on of proposed activity | y : | | |
| I support t | he application | I oppose the application | I am neutral to the application | n (neither support or oppose) |
| Clearly state v | which parts of the app | lication you support or oppos | se or wish to have amended: | |
| | | | | |
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| | | | | |
| | | | | |
| The reasons f | or making my submiss | sion are (briefly describe the | reasons for your views, attach f | urther pages if necessary): |

Office use only

Received date: Support Oppose W.T.B.H N.B.H

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| Please tick: | |
| I wish to speak at the hearing in support of my submission |) Van Na |
| Would you consider presenting a joint case with others who have made a similar submission? I do not wish to speak at the hearing in support of my submission | Yes No |
| 3. Signature | |
| Signature of person making submission or person authorised to sign on behalf of submitter | |
| | Date: |
| Postal address of person making submission (if different from previous page): | |
| | |
| | |
| Name and phone number (if different from previous page): | |
| Name and phone number (if different from previous page): Contact person: | |
| | |
| Contact person: | |
| Contact person: Mobile: Other phone: | |