



FORM 6

FURTHER SUBMISSION IN SUPPORT OF, OR IN OPPOSITION TO, SUBMISSION ON PUBLICLY NOTIFIED PROPOSAL FOR POLICY STATEMENT OR PLAN

Clause 8 of First Schedule, Resource Management Act 1991

Selwyn District Plan

SCANNED

To Selwyn District Council, P O Box 90, Rolleston 7643.

1. Full name of submitter Lincoln Business Association

This is a further submission in support of or in opposition to a submission on a proposed change to the following plan (The proposal): Selwyn District Plan

2. *I support or oppose the submission of: Paul James Conrie
of Kildare Tree Lincoln Submission No. 506
Decision No. D1

*State the name and address of the original submitter and the submission number of the original submission if available

3. †The particular parts of the submission I SUPPORT / OPPOSE are: that the oak tree on the corner of Gerald St & West Belt be put on the protected tree list

†Clearly indicate which parts of the original submission you SUPPORT or OPPOSE, together with any relevant provisions of the proposal.

4. The reasons for my SUPPORT / OPPOSITION are: There are many oaks in the Kiffey Reserve. This tree (oak) has no particular historical connection with Lincoln. Tim Conolly has discussed the tree with Miss Partle's sister's family who have no problem with the tree being removed. There is a significant advantage in having it removed to enable the new building (library) to be set on the south west part of the site & have a green space on the north east side.

‡I seek the following decision from Selwyn District Council: to leave this oak tree off the protected tree list

‡Give precise details.

5. I WISH / ~~DO NOT WISH~~ to be heard in support of my submission (delete as applicable)
6. If others make a similar submission, I will consider presenting a joint case with them at a hearing (delete if you would not consider presenting a joint case)

7. [Signature] Chapman 24/6/10
Signature of applicant (or person authorised to sign on their behalf) Date

8. Address for service of applicant: P.O. Box 142
Lincoln 7640

Telephone: _____ Fax: _____

Email: _____

Contact person: _____ Designation: _____