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Resource Management (Forms, Fees, and
Procedure) Regulations 2003

Schedule 1

Form 5
Submission on publicly notified Plan Change
Selwyn District Plan

Clause 6 of First Schedule, Resource Management Act 1991



To Selwyn District Council
2 Norman Kirk Drive
PO Box 90
Rolleston
Christchurch 7614
FAX: 03-347-2799

1. Full name of submitter: L.R. + J.A. Bain.

This is a submission on the following proposed Plan Change:

Plan Change 7 (name and number of Plan Change)

2. The specific provisions of the proposal that my submission relates to are: Rolleston

Outline Development Plan Area 3.

(give details).

3. *My submission in SUPPORT / ~~OPPOSITION~~ is:

- (1) The rezoning of Outline development area 3, is a logical extension (squaring off) of the Rolleston Urban Area.
- (2) We have reverse sensitivity issues with our rural land now, which is next to a new subdivision (E.G). We have had the boundary evergreen trees removed, that were great protection for our livestock.
- (3) The landowners of this area have already put a private plan change to the council, to have this area rezoned, (this has since been rejected). This application was done with council advice, and was done through a resource management law specialist firm. We have already sought and financed the information, that is now with the council.

*Include whether you SUPPORT or OPPOSE specific parts of the plan change or wish to have them amended; and the reasons for your views. Continue on a separate sheet if necessary.

4. I seek the following decision from Selwyn District Council:

To rezone Roll-
eston Area 3 to Living Z, for residential
development as soon as possible.

(Give precise details, including the nature of any change sought. Continue on a separate sheet if necessary.)

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. L.R. Bain J.Bain 5/4/10
Signature of submitter (or person authorised to sign on their behalf) Date
8. Address for service of submitter: 132 Levi Rd, RD8, Chch.
7678

Telephone: Ph 3477000 Fax:

Email: ~~judy.les@co.nz~~ judy.les@xtra.co.nz

Contact person: Title (if appropriate)