

**Planning Unit** 

## Notice of Submission on an Application for Resource Consent

Application Reference:

Resource Management Act 1991 - Form 13

Send or deliver your application to: Selwyn District Council, PO Box 90, Rolleston 7643

For enquiries phone: (03) 347-2868

For enquiries email: planninginfo@selwyn.govt.nz

1. Submitter Details			
Name of Submitter(s) (state full name(s)):			
Physical Address:			
Address for Service (if different):			
Email:			
Telephone (day): Mobile:			
2. Application Details			
Application Reference Number (if not stated above):			
Name of Applicant (state full name):			
Application Site Address:			
Description of Proposed Activity:			
3. Submission Details			
I / We: Support all or part of the application Oppose all or part of the application			
Are neutral towards all or part of the application			
The specific parts of the application that my / our submission relates to are: (give details, continue on a separate sheet)			
The reasons for my / our submission are:			

The decision **I / We** would like the Council to make is: (give details including, if relevant, the parts of the application you wish to have amended and the general nature of any conditions sought.)

Updated: July 2013 1 of 2

4	4.	Submission at the Hearing
]		I / We wish to speak in support of my / our submission.
ا		I / We do not wish to speak in support of my / our submission.
ا		If others make a similar submission I / We will consider presenting a joint case with them at the hearing.
l		Pursuant to section 100A of the Resource Management Act 1991 <b>I / We</b> request that the Council delegate its functions, powers, and duties required to hear and decide the application to one or more hearings commissioners who are not members of the Council. ( <i>Please note that if you make such a request you may be liable to meet or contribute to the costs of the commissioner(s). Requests can also be made separately in writing no later than 5 working days after the close of submissions.</i> )
	5.	Signature (Of submitter(s) or person authorised to sign on behalf of submitter(s))
,	Signa	ture: Date:
,	Siana	ture: Date:
	•	
<u>.</u>	<u>ivote</u> .	A signature is not required if you make your submission by electronic means.
	6.	Privacy Information
6 6	applic may a any d	personal information requested in the form is being collected by Selwyn District Council so that we can process your ration. This information is required by the Resource Management Act 1991. This information will be held by the Council. You ask to check and correct any of this personal information if you wish. The personal information collected will not be shared with epartments of the Council not involved in processing your application. However under the Official Information and Meetings 287 this information may be made available on request to parties within and outside the Council.
	7.	Important Information
		The Council must receive this submission before the closing date and time for submissions on this application.  You must also send a copy of this submission to the applicant as soon as reasonably practicable, at the applicant's address for
	5	service.
(	٧	All submitters will be advised of hearing details at least 10 working days before the hearing. If you change your mind about whether you wish to speak at the hearing, please contact the Council by telephone on 347-2868 or by email at blanninginfo@selwyn.govt.nz
4	_	Only those submitters who indicate that they wish to speak at the hearing will be sent a copy of the planning report.
	For	Office Use Only

Updated: July 2013 2 of 2