



Chief Executive Whakatane District Council Private Bag 1002 Whakatane 3158 | Phone 07 306 0500 | Fax 07 307 0718

First Name		Second Name	
Surname		Known As	

House/Unit Number		Street		
RD Number		Suburb/Area		
Town			Post Code	

Home Phone		Work Phone	
Mobile Phone		Date of Birth	
Email Address			

I have applied to the Whakatane District Council for a: ☐ Resource Consent ☐ Building Consent (tick one)

[illegible]

Site No 1				
No:		Street:		Locality:
Legal description:				(Lot, DPS etc)

Please continue over

PART B – TO BE COMPLETED BY PERSON(s) OR ORGANISATION GIVING APPROVAL				
<ul style="list-style-type: none"> Please note all owners of a property must provide written approval if the property is in joint ownership eg husband and wife All occupiers of a property eg lessees must also provide written approval 				
Name of organisation (if applicable)				
Position (if applicable)				
First Name		Middle Name(s)		
Surname		Known As		
Physical Address				
House/Unit Number		Street		
RD Number		Suburb/Area		
Town		Post Code		
Postal Address (if different from Physical address)				
Home Phone		Work Phone		
Mobile Phone		Date of Birth		
Email Address				
I am the (owner, occupier, lessee etc) of the following property				
SITE DESCRIPTION				
No:		Street:		Locality:
Legal description:		(Lot, DP/S, Block etc)		
<ol style="list-style-type: none"> I/We have seen a copy of the application and the supporting information, including plans and the assessment of effects; I/We have signed a copy of the site plan or other relevant plan which is attached to this form; I/We agree to the applicant giving this written approval to the Whakatane District Council; I/We understand that the Council will not have regard to any actual or potential effect of the activity on me/us when considering the application, and the fact that any such effect may occur shall not be relevant grounds upon which the Council may decline to grant the application. I/We understand that this approval can be withdrawn by notice in writing to the Council at any time before the date of the hearing (if any) or the determination of the application 				
Signed			Date	
Signed			Date	
BEFORE SIGNING, PLEASE READ THESE NOTES				
<ol style="list-style-type: none"> If you are unsure of your legal rights in respect of signing this approval, please discuss the matter with your legal advisor. The Council will not accept this form if approval is given subject to conditions listed on the form. While an agreement may be reached between an affected party and the applicant to get written approval, this form must be signed unconditionally. It is recommended that you sign (or initial) and date each page of the application and plans to ensure no misrepresentation occurs by either party. If you have any queries about this matter, please contact the Council's planning staff for assistance ph (07) 306 0500. 				
FOR OFFICE USE ONLY				
RC/BC ID		Date received		
CSO Initials				