

Under section 127 or 221 of the Resource Management Act 1991

		e Consent – guide for applicants
(Wh	en Iodgii	ng your application, please detach this page and keep it for your future reference)
Hav	ve you p	rovided the following?
	, .	
1.		Your application and Assessment of Environmental Effects fully completed
2.		An Assessment of Environmental Effects. The detail that corresponds with the scale and significance of the effects that the proposed change and/or cancellation of the proposed activity may have on the environment. Include a full description of the change to, or cancellation of the condition of the proposed activity, the effects that may be generated and how these would be managed.
3.		Where applicable, plans drawn to scale, including:
		* Site plan that identifies the property boundaries
		* Any other buildings (highlighting the proposed building)
		* Distances to boundaries (between all structures and boundaries)
		* Vehicle entrance, driveway, turning circle and on-site manoeuvring
		* Floor plan(s)
		* Identification of topography
		* Certificate of Title
4.		Elevation drawings, or if the building is being re-sited, photos
5.		The written approval of any affected person(s). Refer to the completed Affected Person(s) Written Approval Form
6.		If Māori land – evidence of right to build, eg Licence to Occupy (given by the Trustees), Occupation Orders, Hapū Partition (issued by Māori Land Court)
		Tartition (issued by Maon Earla Court)
7.		Is your activity going to impact on a State Highway, eg the proposed access for your dwelling is directly off a State Highway? If so, then you will need to provide consent from NZTA with your application. If you have not received
		consent then you must provide evidence of your consultation with NZTA.
8.		Application fee/deposit Note: the initial lodgement deposit paid on application may not cover the total cost of processing this application. The Council charges for receiving processing and granting of consents on an actual costs basis. You may receive a refund or an account for additional costs.

All of the above information must be supplied with your application. **Pursuant to Section 88(3) of the Resource Management Act 1991 your application may be rejected if the information and application is incomplete**. You have the ability, under Section 88(5), to object to the decision to reject your application, if applicable. Non notified applications take up to 20 working days to process once accepted. Notified applications can take up to 70 working days to allow for statutory notification time and convening of a Hearing and Consents Committee meeting.

Please do not hesitate to contact the Duty Planner on 07 306 0500 if you require any assistance. Our postal address is Whakatāne District Council, Private Bag 1002, Whakatāne 3158, email planning@whakatane.govt.nz



Location of proposed activity/project

that may be generated and how these would be managed.

APPLICATION FOR CHANGE OR CANCELLATION OF CONDITION OF RESOURCE CONSENT/CONSENT NOTICE

Under section 127 or 221 of the Resource Management Act 1991

Please print clearly

Describe the location as it is commonly known and in a way that will enable it to be easily identified e.g. the street address, the				
legal description, the name of any relevant stream, river or other water body to which the application relates, proximity to any well-				
known landmark, the grid reference.				
Property Address				
Owned by				
Legal Description	Lot:	DPS:		
Cross Lease/Unit title	Flat/Unit:	DPS:		
Legal Area				
Other information relevant	t to location:			
Description of the pr	oposed change			
	olication and any District Plan rule	es/standards infringed		
		-		
Assessment of effect	s			
Note: The detail that corres		of the effects that the proposed change and/or cancellation of the proposed		

activity may have on the environment. Include a full description of the change to, or cancellation of the condition of the proposed activity, the effects



Pre a	pplication info	rmation				
					Yes	No
Have you received pre-application information or had a pre-application meeting regarding this proposal from the Council? If YES, provide the name of the staff member(s).						
Date c	of meeting:		Staff member(s)			
Cons	ultation					
	nave consulted with	the following affe	ected or interested parties:			
Name			Address			
Tick one	e of the following:					
Α.	They had no conce	rns				
B.	They raised the foll	owing concerns:				
	(continue on a senarate	sheet where necessa	rv)			
	(continue on a separate sheet where necessary) I have addressed these by					
	(continue on a separate	sheet where necessa	ry)			
Λffo	cted party appr	ovals				
			f the following affected perso	nc		
Name	iave obtained the w	Address	the following affected perso	Owner	Occupier	
Name		7 daress		Tick if applicable	Tick if applic	able



		Please print clea	arly
ilaaA	cant details		
	ant name:		
	nic address for service:		
Phone	number:	Mobile number:	
Include d	area code		
Postal	address:		
Agen	t or nominated contact if	different from applicant	
Agent	or nominated contact name(s):		
Electro	nic address for service:		
Phone	number:	Mobile number:	
	area code	Woolie Humber.	
	address:		
rostar	dui ess.		
Owne	er/occupier of the land to	which the resource consent will apply if different from applicant	
	/occupier name(s):		
	nic address for service:		
Phone	number:	Mobile number:	
	area code		
	address:		
. 000			
Addr	esses for correspondence	e and payment/invoices	
All cor	respondence (excluding invoice	s) sent to:	
	Applicant	Agent/nominated contact Owner/occupier	
Person	paying for this consent/invoice	es will be sent to:	
	Applicant	Agent/nominated contact Owner/occupier	
Site v	isit requirements		
O.CC V			
	As landowner and with the cor	nsent of any occupiers or lessees, I agree to Council staff or authorised consultants	
		bject of this application, for the purpose of assessing this application	
	visiting the site willer is the sa	bject of this application, for the purpose of assessing this application	
	Signature:	Date:	
	• •	owner please provide details of the landowners or person authorised to sign on be	half
	of the landowner below:		
	Full name		
ŀ			
	Contact phone number(s)		
Details		Ith and safety concerns in relation to the application site, that Council staff should be	be
	of, eg dogs, locked gates, chemi		
			8444
			36



Notification information			
	Yes	No	
Are you requesting the application to be publicly notified?			
Are you requesting the application to be limited notified to any persons who you consider are likely to be adversely affected* by your proposal (if the adverse effects are minor or more than minor) and who have not provided their written approval?			
*Please note: it is at the discretion of Council to determine who is adversely affected.			
Deposit fee			
The required deposit fee must be paid before any processing of the application will start.			
I enclose a deposit fee of \$			
Note: The initial lodgement deposit paid on application may not cover the total cost of processing this application. The Council charges for receiving, processing and granting of consents on an actual csots basis. You may receive a refund or an account for additional costs.			
I/We understand that Council may invoice me for the actual and reasonable costs incurred in the processing of this application. Subject to my/our rights under Sections 357B and 358 of the RMA to object to any costs, I/we undertake to pay all and future processing costs incurred by the Council.			
Without limiting the Council's legal rights, if any steps, including the use of debt collectors, are necessary to recover unpaid processing costs, I/we agree to pay all costs of recovering those processing costs.			
If this application is made on behalf of a trust (private or family), a society (incorporated or unincorporated) or a company, in signing this application I/we are binding the trust, society or company to pay all of the above costs and guaranteeing to pay all the above costs in my/our personal capacity			
Signature.			
Signature			
Applicant's full name (please print)			
Signature of applicant (or person authorised to sign on behalf of Applicant) Date			

Payments can be deposited into bank account: 01 0434 0334411 00. Please include the following reference details; Particulars: RC Code: property address Reference: your surname



	Office use on	ly		
Date & time received	Receipt No.	Application No.		
		I		
Criteria for acceptance: Counter				
criteria for acceptance. Counter				
Application			Yes	No
Application Details complete	ed in full			
Legal Description				
Address for Service				
Assessment against District	Plan or NES			
Check that plans drawn to scale indicate	2:			
* Site plan that identifies	the property boundaries			
	ghlighting the proposed buildin			
* Distances to boundarie	s (between all structures and b	oundaries)		
* Vehicle entrance, turni	ng circle, and onsite manoeuvri	ng		
* Floor plan(s)				
* Identification of topogr	aphy			
* Certificate of Title				
	e building is being re-sited, pho	os		
If Māori land – evidence of	right to build			
Application fee of \$				
N	1 1 . 1 .	/S 00/0\ D144 4004\		
Note: If any criteria indicates "NO", the	application may be incomplete	(Section 88(3) RMA 1991)		
Planner's assessment				
riailler 3 assessment			Yes	No
Is the application complete?			1 163	140
is the approacion complete.			<u> </u>	
If incomplete the reasons are:				
,				