

SUBMISSION ON AN APPLICATION FOR RESOURCE CONSENT UNDER SECTION 96 OF THE RESOURCE MANAGEMENT ACT 1991

TO: THE WEST COAST REGIONAL COUNCIL

NAME OF SUBMITTER: _____
[Full Name]

ADDRESS: _____
[Full Postal Address]

APPLICATION NUMBER: _____

1. I support/or oppose [delete one]
the application _____ [State name of applicant]
for a _____ [State type of resource consent applied for]

_____ [State proposal or activity of applicant]

2. The particular parts of the application I support or oppose are:
[Clearly indicate which parts of the application you support or oppose or wish to have amendments made to]

3. The reasons for making my submission are:
[State in summary the nature of your submission, giving reasons]

4. I wish the consent authority to make the following decision:
[Give details, including the nature of any conditions sought]

5. **I do wish to be heard** in support of my submission.
I do not wish to be heard in support of my submission.
[Delete one]

Signature of person making submission or person authorised to sign on behalf of person making submission.

Date

Contact Details

Address for service of person making submission.

Telephone No. (daytime)

Telephone No. (evening)

Fax No.

Mobile No.

[Name and telephone number if different from above]

Contact person:

E Mail Address (If available)

NOTE: A copy of your submission must be served on the applicant as soon as reasonably practicable after service of your submission on the consent authority.