Office Use Only

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



PART A: DESCRIPTION OF	APPLICATION				
CONSENT NUMBER:	APPLICANT:				
DESCRIPTION OF PROPOSE	D ACTIVITY:				
LOCATION:					
PART B: SUBMITTER DETA	AILS				
Full name/s					
,					
Postal address					
I am the owner/occupier					
(delete one) of the following property:					
Primary contact person/s					
Email address					
Phone number/s	Home:		Business:		
	Mobile:		Fax:		
Signature:				Date:	
Name (BLOCK CAPITALS)					
If this is a joint submission by 2 or more individuals, each individual's signature is required A signature is not required if you make your submission by electronic means.					
				(tick one)	
I/we <b>support</b> the application numbers indicated by a tick on the back of this form					
I/we <b>oppose</b> the application					
I/we neither support nor	<b>oppose</b> the app	olication			
				(tick one)	

I/we <b>wish to be heard</b> in support of my/our submission.	
I/we <b>DO NOT wish to be heard</b> and hereby make my/our submission in writing only.	
If you wish to be heard, and others make a similar submission would you consider making a joint case with them a hearing  Yes  No	t any
If you indicated you wish to be heard, you will be sent a copy of the S.42A Officer's Report and a copy of the Deconce it is released. Please indicate below which format you would like to receive these documents in:  Electronic (CD) copy  Hard (paper) copy  I/we have served a copy of my/our submission on the Applicant as per Section 96(6)(b) of the RMA  Yes	ision
My/our submission is that: (state in summary the nature of your submission. Clearly indicate whether yo	
support or oppose the specific proposal, or wish to have amendments made, giving reasons)	
I/we seek the following decision from the Local Authority:(give precise details)	

## Important information – please read carefully

## **Public information**

The information you provide is public information. It is used to help process a resource consent application and assess the impact of an activity on the environment and other people.

Your information is held and administered by the West Coast Regional Council in accordance with the Local Government Official Information and Meetings Act 1987 and the Privacy Act 1993. This means that your information may be disclosed to other people who request it in accordance with the terms of these Acts. It is therefore important you let us know if your form includes any information you consider should not be disclosed.



388 Main South Road, Paroa, Greymouth 7805 PO Box 66, Greymouth 7840 Telephone (03) 768 0466 Toll Free 0508 800 118 Facsimile (03) 768 7133 Email info@wcrc.govt.nz Website www.wcrc.govt.nz