TRANSFER OF RESOURCE CONSENT

Office Use Only



Pursuant to Sections 134 – 137 of the Resource Management Act 1991, the undersigned gives notice of the transfer of ownership of a Resource Consent, or we request that the name of the Consent Holder is changed, in accordance with the details below:

Section 1: Consent details

This transfer relates to the following resource consent/s:

| Consent number/s | Purpose of consent | Activity location | |
|------------------|--|--|--|
| | (as stated on resource consent document) | (as stated on resource consent document) | |
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Section 2: Current consent holder details (to be completed by transferor)

You should complete any remedial or required works before you transfer your consent. You will also remain liable for any non-compliance with your consent conditions that occurred prior to transfer, and for any consent related charges up to the time of transfer.

Your consent will not be transferred until we have received written authorisation from both parties. Please make sure that this form is fully signed and completed, then returned to us as soon as possible. The West Coast Regional Council does **not** accept responsibility for ensuring that transfer of consent forms are returned and completed.

We will send you written notice when the transfer is completed.

| Full name/s | | | | |
|--------------------------|--|--|-----------|--|
| | | | | |
| | | | | |
| Postal address | | | | |
| | | | | |
| Primary contact person/s | | | | |
| Email address | | | | |
| Phone number/s | Home: | | Business: | |
| | Mobile: | | Fax: | |
| Declaration | I/we wish to transfer the above resource consent/s to the person(s) detailed in Section 3. | | | |
| | Signature of Current holder or holder's agent (please indicate delegated authority): | | | |
| | Print Name (BLOCK CAPITALS) | | | |
| | Date: | | | |

Section 3: New consent holder details (to be completed by transferee)

For individuals, you must provide the full names of all individuals (such as John Robert Smith and Mary Jane Williams).

For **companies and other incorporated entities** you must provide the company name and you must also provide the name of a person or persons who will represent your company and be responsible for the application.

For partnerships, groups and unincorporated entities (such as private or family trusts or unincorporated societies) we must have the details of all authorised partners, trustees, members or officers. We may also request a copy of your society's rules to verify your status as a formal body or society.

We will send you written notice when the transfer is completed.

| - , , | | | | | |
|--|---|---|--|------------------------------|--|
| Full name/s of new holder This is the name/s that your consent | | | | | |
| will be held under. | | | | | |
| We will not issue consents in the name of unregistered companies. | | | | | |
| Postal address | | | | | |
| | | | | | |
| | | | | | |
| Residential address | | | | | |
| If different from postal address | | | | | |
| | | | | | |
| Primary contact person/s | | | | | |
| Email address | | | | | |
| Phone number/s | Home: | | Business: | | |
| | Mobile: | | Fax: | | |
| Declaration | ration I/we agree to the transfer for the above resource consent/s | | | | |
| | Signature of | New holder or holder's agent (| (please indicate c | lelegated authority): | |
| | | | | | |
| | Print Name (BLOCK CAPITALS) | | | | |
| | | | | | |
| | Date: | | | | |
| Partnership/unincorporated | d entity detail: | s | | | |
| For partnerships, groups or unincorporated entities (such as private or family trusts or unincorporated bodies or societies) you must provide details of all authorised partners, trustees or members. Include details of any further partners/trustees/members on a separate page if necessary. Your consent will then include these names, and all individuals will be legally responsible for the activity and any associated compliance issues. Should these persons change, then you must notify us. | | | | | |
| provide details of all authorised par page if necessary. Your consent w | tners, trustees or vill then include th | members. Include details of any nese names, and all individuals v | further partners/trowill be legally response | ustees/members on a separate | |
| provide details of all authorised par page if necessary. Your consent v associated compliance issues. Show Name of person: Status (such as partner, member | tners, trustees or vill then include th | members. Include details of any nese names, and all individuals v | further partners/trowill be legally response | ustees/members on a separate | |
| provide details of all authorised par page if necessary. Your consent wassociated compliance issues. Show the status (such as partner, member or trustee): Residential address: | tners, trustees or vill then include th | members. Include details of any nese names, and all individuals v | further partners/trowill be legally response | ustees/members on a separate | |
| provide details of all authorised par page if necessary. Your consent v associated compliance issues. Show Name of person: Status (such as partner, member or trustee): | tners, trustees or vill then include th | members. Include details of any nese names, and all individuals v | further partners/trowill be legally response | ustees/members on a separate | |
| provide details of all authorised par page if necessary. Your consent wassociated compliance issues. Show the status (such as partner, member or trustee): Residential address: Signature: | tners, trustees or vill then include th | members. Include details of any nese names, and all individuals v | further partners/trowill be legally response | ustees/members on a separate | |
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| provide details of all authorised par page if necessary. Your consent wassociated compliance issues. Show the second of the seco | tners, trustees or vill then include th | members. Include details of any nese names, and all individuals v | further partners/trowill be legally response | ustees/members on a separate | |
| provide details of all authorised par page if necessary. Your consent wassociated compliance issues. Show associated compliance issues. Show the second of t | tners, trustees or vill then include th | members. Include details of any nese names, and all individuals v | further partners/trowill be legally response | ustees/members on a separate | |

Include details of any further partners/trustees/members on a separate page if necessary.

Occupier details If the owner and/or occupier of the activity site differ from the Consent Holder (transferee) please provide their names and contact details Owner name/s Postal address Email address Phone number/s Private: Mobile: Business: Fax: Occupier name/s

Application fees

Postal address

Email address

Phone number/s

The transfer of a Resource Consent to another person or party incurs a transfer fee of \$164 plus GST (\$188.60 incl GST) in accordance with the West Coast Regional Council Charges Schedule.

Payment can be made in the following ways:

• at the West Coast Regional Council Office by cash or cheque

Private:

Mobile:

- by post by cheque
- · by electronic banking using the details below:

WEST COAST REGIONAL COUNCIL

| WEST GOAST REGIONAL COGNOIL | | | | | | | |
|---------------------------------------|--------------------------------|-------------------------------------|--|--|--|--|--|
| WESTPAC BANK ACCOUNT NU | JMBER: | · | | | | | |
| 0 3 0 8 4 6 | 0 1 2 1 5 0 0 | 0 0 | | | | | |
| Bank Branch Number | Account Number | Suffix | | | | | |
| Payer particulars – Resource Consent | Payer reference - RCTRANSFER | | | | | | |
| Payer particulars (max 12 characters) | Payer code (max 12 characters) | Payer reference (max 12 characters) | | | | | |
| | | | | | | | |

Important information – please read carefully

Unless it expressly provides otherwise, a Resource Consent may be transferred to another person or party if they will be operating the same activity at the same location. That transfer can involve the whole or part of a Resource Consent, and if it is a water or discharge permit, may be temporary or permanent.

Please note, this form is not for the transfer of location of a resource consent.

A Resource Consent is a legal document. This means that written authorisation from all relevant parties is required before it can be transferred. This form enables the transfer process, and must be completed and signed by **both** the current and the new Consent Holder.

If you need any further help, please phone the Consents team on (03) 768 0466 or 0508 800 118.



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

Business:

Fax: