Office Use Only

WITHDRAWAL OF RESOURCE CONSENT APPLICATION



Consent	
Number:	
Applicant's Name:	
Applicant's	
Contact	
Address:	
I wish to withdraw all or part of this consent I wish to proceed with this consent application?	application:
All Part Yes	
	_
If parts of this consent are to be withdrawn, please give details of which parts are to be withdrawn:	
Reasons for wishing to withdraw the consent application:	
Signature of Applicant or Applicant's agent Date	
Print Name (BLOCK CAPITALS)	L
,	

Important information – please read carefully

If you wish to withdraw the application an invoice will be sent for costs associated with any processing undertaken by the Council for your application.

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.

More information

For more information on resource consents, visit our website at www.wcrc.govt.nz or phone a member of the Consents team on (03) 768 0466 or 0508 800 118.



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