



WAIMAKARIRI DISTRICT COUNCIL
NOTICE OF SUBMISSION TO
RESOURCE CONSENT
RESOURCE MANAGEMENT ACT 1991

Name: *(state full name)*

Address:

I support OR oppose the application of: *(state name of applicant)*

to *(state proposal of applicant)*

The particulars of the application my submission deals with are:

The reasons for my submission are:

(attach further sheets if necessary)

What decision do you wish Council to make?

What conditions (if any) do you wish to have imposed on the application?

I desire OR do not desire to be heard in support of my submission.

NOTE: YOU ARE REQUIRED TO SERVE A COPY OF THIS SUBMISSION ON THE APPLICANT

Signature:..... Date:

(to be signed for or on behalf of person making the submission)

Address for Service:

Telephone Number:..... Fax Number:.....

OFFICE USE ONLY

Received at the _____ Service Centre on _____ by _____