



WAIMAKARIRI
DISTRICT COUNCIL

SUBMISSION FORM

RESOURCE MANAGEMENT ACT 1991

WAIMAKARIRI DISTRICT PLAN - PROPOSED PLAN CHANGE

**To: Waimakariri District Council
Private Bag 1005
Rangiora 7440**

Fax: 03-313-4432

Office Use Only
File No:
Submission No:
Date:

PLEASE USE A SEPARATE FORM FOR EACH SUBMISSION

I/We wish to make the following Submission to the Waimakariri District Plan – Proposed Plan Change

No:

Name:

Name of Organisation:

Address:
.....
.....
.....

Postal Address/Address for Service:
.....
.....
.....

Ph No:

Fax No:

Signature:
(of person making submission or person authorized to make decision on behalf)

Date:

NOTE: A signature is not required if you make your submission by electronic means.

Do you wish to be heard in support of your submission? Yes No

If others are making a similar submission I / WE WOULD / WOULD NOT be prepared to consider presenting a joint case with them at the hearing.
(Please cross out the inappropriate response)

Privacy Act 1993

Please note information on this form and the content of your submission will be made publicly available as part of the decision-making process

This form is in the format required by Form 5 of the Resource Management (Forms, Fees and Procedure) Regulations 2003.

SUBMISSION TO WAIMAKARIRI DISTRICT PLAN – PROPOSED PLAN CHANGE NO.

Name of Submitter:

Submission Sheet No:

My / Our Submission is that:	I / We seek the following decision from Council for the following reasons:	Submission Ref No Office Use Only