# **DEVELOPMENT PLANNING**

# **Further Submission Form**

Further submissions close on Monday, 21 November 2022 at 5pm.

| I/we are further submitt                          | ing on:  |                                      |  |  |  |  |  |  |  |  |
|---|--|--------------------------------------|--|--|--|--|--|--|--|--|
| Proposed District Plan                            | Variation 1: Housing Intensification           | Variation 2: Financial Contributions |  |  |  |  |  |  |  |  |
| Please use a separate form for each consultation. |  |                                      |  |  |  |  |  |  |  |  |
| Clause 8 of Schedule 1, Resource Man              | agement Act 1991                               |                                      |  |  |  |  |  |  |  |  |
| To: Waimakariri District C                        | ouncil   |                                      |  |  |  |  |  |  |  |  |
| Further submitter details                         | 5  |                                      |  |  |  |  |  |  |  |  |
| Name of further submitter:                        |  |                                      |  |  |  |  |  |  |  |  |
| Organisation name and conta                       | ct (if representing a group or organisation):  |                                      |  |  |  |  |  |  |  |  |
|   |  |                                      |  |  |  |  |  |  |  |  |
| Postal address/Address for se                     | ervice:  | Postcode:                            |  |  |  |  |  |  |  |  |
| Email:  |  | Phone:                               |  |  |  |  |  |  |  |  |
| Only certain persons can m<br>l am:               | nake a further submission. Please select       | the option that applies to you.      |  |  |  |  |  |  |  |  |
| a person representing a rel                       | evant aspect of the public interest            |                                      |  |  |  |  |  |  |  |  |
| a person who has an intere                        | st in the proposal that is greater than the in | terest the general public has        |  |  |  |  |  |  |  |  |
| the local authority for the r                     | elevant area                                   |                                      |  |  |  |  |  |  |  |  |
| Please explain why you come                       | within the category selected above:            |                                      |  |  |  |  |  |  |  |  |
| Hearing options                                   |  |                                      |  |  |  |  |  |  |  |  |
| I wish to be heard in support                     | of my further submission? Yes No               |                                      |  |  |  |  |  |  |  |  |

If others make a similar further submission I will consider presenting a joint case with them at a hearing.

**PLEASE NOTE** - A signature is not required if you submit this form electronically. By entering your name in the box below you are giving your



authority for this application to proceed.

(of person making submission or person authorised to make decision on behalf)

No

Yes

Date:

| This further submission is in relation to the <u>original submission</u> of: Enter the details of the original submitter: • name, address or email; and • submission number (and point(s), if applicable) | The particular parts of the original submission I/we support /oppose are: | My/our<br>position on<br>the original<br>submission is:<br>Support or<br>oppose | The reasons for my/our support/<br>opposition to the original<br>submission are: | Allow or<br>disallow<br>the original<br>submission<br>(in full or in<br>part) | part) to indicate the decision you |
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| This further submission is in relation to the <u>original submission</u> of:  Enter the details of the original submitter:  • name, address or email; and  • submission number (and point(s), if applicable) | My/our<br>position on<br>the original<br>submission is:<br>Support or<br>oppose | The reasons for my/our support/<br>opposition to the original<br>submission are: | Allow or<br>disallow<br>the original<br>submission<br>(in full or in<br>part) | part) to indicate the decision you |
|--|---|--|---|------------------------------------|
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#### Note

A copy of your further submission must be served on the original submitter within 5 working days after it is served on the Waimakariri District Council. Contact details for all submitters can be found on the Waimakariri District Council website, at <a href="waimakariri.govt.nz/planning/district-plan">waimakariri.govt.nz/planning/district-plan</a>.

Please note that your submission (or part of your submission) may be struck out if the authority is satisfied that at least one of the following applies to the submission (or part of the submission):

- · it is frivolous or vexatious
- · it discloses no reasonable or relevant case
- · it would be an abuse of the hearing process to allow the submission (or the part) to be taken further
- · it contains offensive language
- it is supported only by material that purports to be independent expert evidence, but has been prepared by a person who is not independent or who does not have sufficient specialised knowledge or skill to give expert advice on the matter.

## **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 6 of the Resource Management (Forms, Fees and Procedure) Regulations 2003.

#### Further submissions close on Monday, 21 November 2022 at 5pm.

### **Returning this form**

You can:

- Email it to: developmentplanning@wmk.govt.nz Subject line: Further Submission
- Post it to: Waimakariri District Council, Private Bag 1005, Rangiora 7440
- Deliver it to a Council Service Centre in Rangiora, Kaiapoi or Oxford