Notice of submission to resource



CONSENT resource management act 1991

Please read this first

This form will be scanned by electronic equipment. It is important that you:

- use a blue or black pen to complete this form; and
- print clearly.

Applicant details (Please print in CAPITALS)

Full name
Postal address
Town Postcode 0 - Business phone number Mobile phone number
Email
I support OR oppose the application of: to (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?
Do you wish to be heard in support of your submission? Yes No
Signature: Date:
(to be signed for or on behalf of person making the submission)
If you wish to email your submission, please do so by emailing it to: info@tararuadc.govt.nz
Please note: All information provided becomes public information
I do not wish my contact details to be made public
NOTE: You are required to serve a copy of this submission to the applicant