

Application for change or cancellation of resource consent condition

Section 127, Resource Management Act 1991

A134780

Address all correspondence to: Chief Executive, Ōpōtiki District Council, PO Box 44, Ōpōtiki 3162 Ph 07 315 3030, Fax 07 315 7050 Or return to 108 St John Street, Ōpōtiki					
Site location details					
RC reference no.					
Property address					
Owned by					
Legal description	Lot:	DPS:			
Cross lease/unit title	Flat/unit:	DPS:			
Legal area					
Proposed amendment					
The specific condition this application relates to is:					
The proposed change is:					
Information to be provided with this application					
 In accordance with Schedule 4 of the Resource Management Act 1991, an assessment of environmental effects in the detail that corresponds with the scale and significance of the effects that a change to, or cancellation of, the activity may have on the environment. Any information required to be included in this application by the district plan, the regional plan, the Resource Management Act 1991, or any regulations made under that Act (list all documents you are attaching below). 					

Applicant details				
Full name				
Postal address				
Phone (home)		Phone (work)		
Mobile		Email		
Agent or nominated cor	ntact (if different from applicant)			
Full name(s)				
Postal address				
Phone (home)		Phone (work)		
Mobile		Email		
Addresses for correspor	ndence and payment/invoices			
·	iding invoices) to be sent to: \Box Applicant to be sent to: \Box Applicant \Box Agent/no	_		contact
Fee				
☐ I enclose the applica	ble fee/deposit of \$			
Information				
applicant undertakes to pay applications. If any steps, incapplicant agrees to pay all cunincorporated) or a compapay all the above costs in the Privacy information: Ōpōti under the RMA and to collect public register. The details many general public and communications.	Subject to the applicant's rights under section all and future processing costs incurred by the cluding the use of debt collectors and/or lawy collection costs. If this application is made on my, signing this application binds the trust, so eir personal capacity. Refer to www.odc.govt. ki District Council requires the information your statistics. The council will hold and store the may also be made available to the public on the ity groups about all consents which have been ion of any details, please contact the council.	ne council. The covers, are necessary behalf of a trust (ociety or company nz/feescharges for have provided e information, inche council's websen processed or is	uncil may in the recovery to recovery all and a recovery all are applicable on this for all all a fee. These controls are applicable on this for all a fee. These controls are are all a fee. These controls are	issue interim invoices for er unpaid processing costs, the family), a society (incorporated or the above costs and guarantee to le fees. Im to process your application associated attachments, on a details are collected to inform the
•	cant or authorised agent			
	ve read and understood the notes above ees are required to provide contact deta	•	-	st is the applicant, at least two
Full name	ees are required to provide contact detail	iis and sign tilis	101111.	
Signature		Dat	e	
Full name				
Signature		Dat	e	
	OFFICE USE C	DNLY		
Date received		Processe	Processed by	
Amount paid		Receipt	Receipt number	