

# Application for Change or Cancel Consent Conditions

A complete Administration Form (Form A) MUST accompany this Activity Information and Assessment Form (Form B) when lodging your application. The purpose of this form is to provide the applicant with guidance on information that is required under the Resource Management Act 1991. These forms are to act as a guide only, and Horizons Regional Council reserves the right to

request additional information. Completing all questions in full will assist with the prompt processing of your application. Any omissions in this form may result in your application being returned (under Section 88 (3)) and may result in additional costs while the required information is obtained.

**APPLICANT NAME** .....  
(Refer to Form A)

## 1 APPLICATION PURPOSE

Please detail the consent number/s you wish to change or cancel the conditions of.

Consent number (e.g. ATH-2018123456.00)	Activity authorised

Please detail the condition number/s and give details of the proposed changes or cancellations.

If multiple consents, please state consent number under condition. If preferred, you can also attach a copy of the consent/s with annotations showing changes requested.

Condition number	Details of the proposed changes/cancellation

## 2 SITE DETAILS

**If known (and relevant), please supply map coordinates that relate to the proposed change.**

NZTM 2000 E..... N.....

Please make sure the following is shown on your aerial photograph or map:

- Site of proposed changes
- Surrounding key roads, towns etc. for orientation
- Property boundaries
- Any other relevant features

## 3 ASSESSMENT OF ENVIRONMENTAL EFFECTS

For your application to be considered, an assessment of effects must be included. Please answer all questions below. Additional information may need to be provided depending on the scale and significance of your proposal.

Describe any adverse effects that may result from the proposed change or cancellation to the condition/s. You must include an Assessment of Environmental Effects as outlined in Schedule 4 of the Resource Management Act 1991. The extent of detail required should be relative to the scale and significance of the potential adverse effects the activity may have on the receiving environment.

Will the proposed change or cancellation to the condition/s result in any adverse effects that are different from those currently authorised by the consent?

If relevant, describe any proposed mitigation measures to help prevent or reduce actual or potential effects. Include safeguards and contingency plans where relevant.

If relevant, describe any proposed monitoring for adverse effects that may arise from the proposed change.

If relevant, describe any alternative methods, locations or options for carrying out the activity.

#### **4 RELEVANT STATUTORY PROVISIONS AND ENVIRONMENTAL STANDARDS**

The Resource Management Act 1991 requires this application to include an assessment of the change proposed against any relevant provisions of the One Plan.

*For a complete copy of the One Plan visit <http://www.horizons.govt.nz/publications-feedback/one-plan>*

If relevant, provide an assessment of the change/s proposed against any relevant National Environmental Standard (NES) or national planning document. (E.g. NES for Sources of Human Drinking Water, NES for Plantation Forestry)

**5 CONSULTATION/AFFECTED PARTIES**

If relevant, please include evidence of any consultation undertaken for this application. This may include (but not be limited to) consultation with adjoining landowners, other consent holders in the immediate area, Iwi, government departments/ministries (e.g. DoC), territorial authorities and recreational associations (e.g. Fish and Game New Zealand). Please ensure that you have considered any original affected parties, and any statutory acknowledgements in the Horizons Region. For more information visit (<http://www.horizons.govt.nz/about-our-region-and-council/iwi-and-hapu/statutory-acknowledgements>)

If you are in doubt about who you should be talking to call a member of the consents team on **0508 800 800**.

**Please provide details of those you have identified as parties who may be affected by the change or cancellation. If you have discussed your proposal with any of these parties, please record any comments made by them and your response to them and submit this with your application.**

Name .....

Address .....

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Affected party approval form attached

Name .....

Address .....

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Affected party approval form attached

Name .....

Address .....

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Affected party approval form attached

Name .....

Address .....

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Affected party approval form attached

- Completed administration form (Form A)
- A SITE plan to scale that clearly shows:
  - Site of proposed changes
  - Surrounding key roads, towns etc. for orientation
  - Property boundaries
  - Any other relevant features
- If relevant, affected party approval forms.

Please contact the consents team on freephone **0508 800 800** if you require assistance with your application.