

SUBMISSION ON A RESOURCE CONSENT APPLICATION

UNDER SECTION 96 OF THE RESOURCE MANAGEMENT ACT 1991

TO: Manawatu-Wanganui Regional Council
T/A Horizons Regional Council
11 - 15 Victoria Avenue
Private Bag 11025
PALMERSTON NORTH 4442

Submitter - person or organisation: *(insert name in full)*

Postal address for service:

Physical address:

Home phone no:

Mobile no:

Work phone no:

Fax no:

E-mail address:

This is a submission on an application from *(name of applicant)*

Application number(s):

Do you support or oppose the application(s): SUPPORT OPPOSE NEITHER
(Please state reasons for this Submission overleaf)

Do you wish to be heard in respect of your submission? YES NO

Are you willing to attend a pre-hearing meeting should one be held? YES NO

Name:

Signature:

(Authorised to sign on behalf of Submitter)

Date:

Continued Overleaf

What specific parts of the application do you support or oppose?

Clearly indicate which parts of the application you support or oppose or wish to have amendments made to

Please state your reasons for supporting or opposing the application: *Give details*

Please state the decision you wish Horizons Regional Council to make on this application:

Give precise details including the nature of any conditions sought

NOTE:

- You are required to send a copy of this submission to the applicant.
- If you fax or email (consent.submissions@horizons.govt.nz) your submission please also send the original version by post.
- Should you require any assistance or have any queries, please contact any member of the consents team at Horizons Regional Council to discuss the proposal and your submission.
- Horizons Regional Council's consent team can be contacted on freephone 0508 800 800 for any further information you may require.