

## Form 9

### APPLICATION FOR RESOURCE CONSENT UNDER SECTION 88 OF THE RESOURCE MANAGEMENT ACT 1991

To: THE HAURAKI DISTRICT COUNCIL

1. I/We,

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(Full Name of Applicant)

apply for the following type(s) of resource consent: *[for any activity in the coastal marine area, state coastal permit. Otherwise state 1 or more of the following: land use consent, subdivision consent, water permit, or discharge permit. Describe the activity to which the application relates].*

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2. \*The names and addresses of the owner and occupier (other than the applicant) of any land to which the application relates are as follows:

*[give names and addresses].*

*\*Delete if not applicable*

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3. The location of the proposed activity is as follows:

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*[Describe the location as it is commonly known and in a way that will enable it to be easily identified (eg: the street address, the legal description, the name of any relevant stream, river, or other water body to which the application relates, proximity to any well-known landmark, the grid reference (if known)]*

4. No additional resource consents are needed for the proposed activity (or The following additional resource consents are needed for the proposed activity and have (or have not) been applied for:)  
*[give details]*

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5. I attach, in accordance with the Fourth Schedule 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 the proposed activity may have on the environment.

6. I attach any information required to be included in the application by the district plan, the regional plan, the Resource Management Act 1991, or any regulations made under that Act.  
*[List all documents that you are attaching].*

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7. \*As this is an application for a subdivision consent, I attach information that is sufficient to adequately define-

- (a) The position of all new boundaries; and
- (b) The areas of all new allotments; and  
*[Delete if the subdivision involves a cross-lease, company lease, or unit plan.]*
- (c) The locations and areas of new reserves to be created, including any esplanade reserves and esplanade strips;
- (d) The locations and areas of any existing esplanade reserves, esplanade strips, and access strips; and
- (e) The locations and areas of land below mean high water springs of the sea, or of any part of the bed of a river or lake, to be vested in the Crown or local authority under section 237A of the Resource Management Act 1991; and
- (f) The locations and areas of land to be set aside as new roads.

*\*Delete if this is not an application for a subdivision consent.*

\_\_\_\_\_  
[Signature of applicant (or person authorised to sign on behalf of applicant)]

\_\_\_\_\_  
[Date]

Address for service of applicant: \_\_\_\_\_ Telephone No: \_\_\_\_\_  
\_\_\_\_\_  
Fax No: \_\_\_\_\_  
\_\_\_\_\_  
Email: \_\_\_\_\_

**Note to applicant**

You may apply for 2 or more resource consents that are needed for the same activity on the same form. You must pay the charge payable to the consent authority for the resource consent application under the Resource Management Act 1991 (if any).



HAURAKI DISTRICT COUNCIL

**RESOURCE MANAGEMENT ACT 1991**

**AFFECTED PERSONS RESPONSE**

The following application for a resource consent is to be lodged with the Hauraki District Council.

Type of Consent: \_\_\_\_\_ land use/subdivision  
(delete whichever is not applicable)

Description of Proposal: \_\_\_\_\_  
Provide enough detail so that your proposal can be clearly understood.

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You must also provide the plans to illustrate your proposal.

I \_\_\_\_\_ am the applicant and as  
Full name of applicant  
part of my application I am able to seek approval to the proposal from persons who may be adversely affected.

Please examine the plans and the full details of my application.

Please consider the effect the application may have on you (if you are unsure you should seek advice). If you approve of the application the Council cannot take into account any effect of the application on you when it considers the application. (If the application is publicly notified you may, however, make a submission in support of or against the proposal).

If you approve of the application please sign and date the plans and complete the following details:

Your name: \_\_\_\_\_ Signature: \_\_\_\_\_

Your address: \_\_\_\_\_

Contact Phone No: \_\_\_\_\_

Date: \_\_\_\_\_

Whether you are the owner/occupier  
Delete whichever is not applicable

If you have any comments you can use the back of this form

If you have any queries you can contact a Consents Officer at Hauraki District Council, William Street, Paeroa, Telephone 07-862-8609 or Free Phone (Within District) 0800-734-834.

Address All Correspondence To:  
The General Manager  
Post Office Box 17, William Street  
Paeroa, New Zealand  
Telephone (07) 862-8609  
Facsimile (07) 862-8607

Free Phone (Within District)  
0800-734-834  
E-Mail: [info@hauraki-dc.govt.nz](mailto:info@hauraki-dc.govt.nz)  
Website: [www.hauraki-dc.govt.nz](http://www.hauraki-dc.govt.nz)