

# FORM 13 SUBMISSION ON RESOURCE CONSENT APPLICATION



**Taranaki Regional Council**  
Telephone: 06-765 7127  
Facsimile: 06-765 5097  
Email: [consents@trc.govt.nz](mailto:consents@trc.govt.nz)  
Website: [www.trc.govt.nz](http://www.trc.govt.nz)

### Important Note:

Please ensure that all sections of this form are completed and that the Taranaki Regional Council receives this submission before the closing date and time specified on the notification.

### For Council Use Only

Post **The Chief Executive**  
To: Taranaki Regional Council  
Private Bag 713  
Stratford 4332

Or: Email to: [consents@trc.govt.nz](mailto:consents@trc.govt.nz)  
Fax to: 06 765 5097

## 1. Submitter's details

Full Name: \_\_\_\_\_

### Address for Service:

Email: \_\_\_\_\_

Postal: \_\_\_\_\_

\_\_\_\_\_ Post Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Contact person: (if different to name above): \_\_\_\_\_

Street Address of property affected (if different to address above) \_\_\_\_\_

### Serving of documents

The Council will serve all formal documents electronically via the email address provided above. If you have another preference, please indicate below:

- Email only       Email plus hardcopy in post       Hardcopy only (*posted*)

## 2. Application to which submission relates

Name of Applicant: \_\_\_\_\_

Proposal (activity type and location): \_\_\_\_\_

TRC Consent Number(s): \_\_\_\_\_

## 3. Attendance and wish to be heard at consent hearing

- I/we **do not** wish to be heard in support of my/our submission  
*(This means that you will not be advised of the date of any consent hearing and cannot speak at any hearing. However, you will still retain your right to appeal any decision made by the Council.)*
- I/we **do** wish to be heard in support of my/our submission  
*(This means that you will have the option to speak in support of your submission at any consent hearing.)*
- If others make a similar submission, I/we will consider presenting a joint case with them at the hearing  
**[Please tick if you will consider presenting a joint case otherwise leave blank]**

**4. The specific parts of the application this submission relates to are:**

The whole application (*tick box*), or parts of the application described below:

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*(Attach additional sheet if necessary)*

**5. My submission is (*give details*):**

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*(Attach additional sheet if necessary)*

**6. I seek the following decision from the Council**

To grant consent

To refuse consent

If Consent is granted, the conditions I seek are:

**Note:** *You do not have to suggest conditions, particularly if you seek that consent be refused.*

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*(Attach additional sheet if necessary)*

**7. Request for independent commissioner(s)**

Pursuant to section 100A of the Resource Management Act 1991, I request that the Taranaki Regional Council delegates its functions, powers, and duties required to hear and decide the application to one or more hearing commissioners who are not members of this Council.

**[Please tick if you do wish to make a request otherwise leave blank]**

**Note:** *Such a request may be made [in writing] up to 5 working days after close of submissions. If you do make a request under section 100A of the Resource Management Act 1991, **you will be liable to meet or contribute to the costs** of the hearings commissioner or commissioners.*

**8. Signature**

I/we have served a copy of this submission on the applicant (*This is required by section 96(6) of the Resource Management Act 1991*)

Signature:\* \_\_\_\_\_  
*(Person making submission, or person authorised to sign on behalf of person making submission.)*

Date:            /            /