Application Form to Change or Cancel Resource Consent Conditions

Section 127 of the Resource Management Act 1991 (RMA). This form provides us with your contact information and details about your application. Please print clearly and complete all sections.

Note to applicant:

You must include all information required by this form. The information must be specified in sufficient detail to satisfy the purpose for which it is required.

Please print clearly and complete all sections.

To: Name of Council that is the consent authority for this application: Select a Council

This application relates to the following resource consent
The name of the holder of the resource consent is:
Applicant Name
Please provide the full name of the persons, company, society or trust applying for this change or cancellation of consent condition. If the applicant is a trust, please provide the full name/s of all trustees of that trust.

Applicant Contact Details

Postal Address:		
Post code:	Email:	
Phone:	Mobile:	



















Agent Contact Details

If you have an a	ngent or other person acting on your behalf, plea	ase complete t	he details below.	
Agent:				
Contact:				
Postal Address:				
Post code:		Email:		
Phone:		Mobile:		
Location of Pro	posal	1		
	with as much detail as you can, so the site for you number, street name, town, natural and physical c			
Property address	s:			
Legal descriptio	n:			
This application relates to the following condition(s) of the consent				

The proposed change is as follows:

If the space provided is insufficient, please attach additional pages.					
Assessment of the proposed change's effects on the environment					
Please attach an assessment of the proposed change's effects on the environment, an assessment against the relevant matters of Part 2 of the RMA and any relevant provisions of NES, regulations, national policy statement, regional policy statement, regional plan and district plan.					
Correspondence and Invoices					
Please let us know where to send any correspondence and invoices.	Where possible any correspo	ondence will be sent by email:			
All correspondence excluding invoices sent to:	☐ Applicant or	☐ Agent			
All invoices sent to:	☐ Applicant or	☐ Agent			
Notification					

The Resource Management Act 1991 allows applications to be notified for public submission on request of the applicant.

Are you requesting that your application be publicly notified?	☐ Yes	□ No			
If you selected 'yes' to the above question, please attach a short summary outlining the details of your application. Have you attached a summary?	☐ Yes	□ No			
Owner of the site					
Landowner's full name, phone number and address:					
OR					
Same as applicant details					
Site Visit Requirements					
As landowner and with the consent of any occupiers or lessee, I am aware that Council staff or authorised consultants will visit the site which is the subject of this application, for the purposes of assessing this application, and agree to a site visit.					
Is there a locked gate or security system restricting access by Council staff?	☐ Yes	□ No			
Are there any dogs on the property?	☐ Yes	□ No			
Are there any hazards that may place a visitor at risk?	☐ Yes	□ No			
Provide details of any entry restrictions that Council staff should be aware of e.g. health and safety, organic farm etc.					

Draft changes				
Do you wish to see d application?	raft changes prior to Council making a dec	ision on the	☐ Yes	□ No
intended to a the right to o	By ticking this box I understand that the opportunity to review the draft changes is an act of good faith by the Council intended to assist with identifying errors before a decision on the application is made. I further understand that Council has the right to continue processing the application if too much time is taken in the review of draft changes. By requesting draft changes I agree to an extension of time under Section 37 of the RMA.			
Signature of the App	licant(s) or Agent			
Please read before si	gning the application form.			
Payment of fees and	charges			
You must pay the chaits website.	arges payable to Council for this applicat	ion under the	RMA. Please refer to Counc	il's Fees and Charges on
By submitting this ap application.	plication to Council, you agree to pay th	e charges set o	out in Council's Fees and Cha	arges relevant to the
Privacy information				
and store the informa	information you have provided on this fo ation on a pubic register. The details ma uest access to, or correction of any deta	ıy also be mad	e available to the public on	
Confirmation by the applicant				
	that I/we have read and understood the intermination of the interminatio		d will comply with our obligat	ions as set out above. <i>(A</i>
Applicant name:		Signature:		Date:
Applicant name:		Signature:		Date
Applicant name:		Signature:		Date

Confirmation by the agent authorised to sign off on behalf of the applicant

As authorised agent for the application, I confirm that I have read and understood the above information and confirm that I have fully informed the applicant of its/their obligations in connection with this application, including for fees and other charges, and that I have the applicant's authority to sign this application on its/their behalf. (A signature is not required if you submit this form electronically.)

Agent's name:	Signature:	Date:	