



DISTRICT COUNCIL
Te Kaunihera aa Takiwaa o Waikato

District Office
15 Galileo Street
Private Bag 544
Ngaruawahia 3742

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Raglan Area: Office 7 Bow Street 07 825 8129
Tuakau Area: Office 2 Dominion Road 0800 492 452

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Fax 07 824 8091

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Application for RAPID or Urban Street Number

APPLICANT

Full name: _____

Legal Property Number:

(in application): _____

Valuation No: _____

Postal address of Applicant: _____

(return correspondence with post code)

Email: _____ Phone: _____ (day) _____ (mob)

RAPID INFORMATION

Property: New Dwelling New Subdivision (multiple lots) Existing Lot

Type: Urban residential Rural residential Paddock

Urban commercial Rural commercial

Are the site **plans/sketches** of the property and the proposed entranceway provided? YES NO

EXISTING PROPERTY INFORMATION

Only complete if this is an application for an existing property

What is the current address of the property (if known)? _____

Does your number need changing? YES NO

Do you need a replacement RAPID sign (rural properties only)? YES NO

There is a \$22 charge for a replacement RAPID plate sign (rural only) – Can pay upfront or be invoiced

NEW PROPERTY INFORMATION

Which road is the property frontage on? _____

Is this part of a new subdivision? YES NO

Has a vehicle entrance way been built? YES NO

Do you need a RAPID number sign (rural properties only - \$33 charge)? YES NO

Site plans MUST be submitted with the application if this is a new property with suggested property number as per LINZ guidelines and standards

OTHER INFORMATION

If this application is related to other council applications enter references below

Vehicle entrance application number? _____

Resource Consent number? _____

Building consent number? _____

APPLICANT'S

Do you require a tax invoice? YES NO

Signed: _____ Date: _____

FOR OFFICE USE ONLY

ENGINEER'S NOTES

Property found on Intramaps	YES	NO	
Need to be measured?	YES	NO	Allocated to: _____
Rates Notified	YES	NO	Date notified: _____
LINZ Notified	YES	NO	Date notified: _____
New sign ordered	YES	NO	Date ordered: _____
New sign posted	YES	NO	Date posted: _____

Inspection Date: _____

PROPERTY RAPID NUMBER: _____

SIGNED: _____

Service Delivery Team Administrator

Payment received	<input type="checkbox"/> YES	<input type="checkbox"/> NO	Receipt No: _____
Online Payment?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	Received By: _____
Memo created	<input type="checkbox"/> YES	<input type="checkbox"/> NO	Service Request (CRM) No: _____
Invoice Required	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Date application received:	_____		Date payment received: _____