

WAIROA DISTRICT COUNCIL

REGULATORY DEPARTMENT

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⇔ +64 6 838 8874

☑ planning@wairoadc.govt.nz

www.wairoadc.govt.nz
 PO Box 54, Wairoa 4160, Hawke's Bay
 Coronation Square, Queen Street, Wairoa

APPLICATION FOR S223 & S224

The information you provide on this form is required so that your application can be processed under the Resource Management Act 1991 and may also be used in statistics collected and provided to the Ministry for the Environment and Wairoa District Council. The information will be stored on a public register and may be made available to the public on request or on the company's or the Council's websites.

Please answer all questions fully.

Fees

A fee for Review & Signature Survey Plan S223, and a fee for Review & Signature Survey Plan S224 are required before your application will be processed. For fee information please go to www.wairoadc.govt.nz/services/planning-and-resource-consents/resource-consents/. Please note that the Wairoa District Council recovers the full cost of processing applications from the applicant in accordance with Section 36 of the Resource Management Act 1991.

| Conse | ent Holder | |
|--------|------------------------|--|
| | Applicant's Full Na | me |
| OR | Company/Trust | |
| | Contact Person/All | Trustee Names |
| | | |
| | | |
| | | oices will be sent to this postal address or email.) |
| Please | e provide an email Af | ND full address. |
| | Number | |
| Email | Address | |
| Postal | Address | Post Code |
| | | |
| | | |
| Corre | spondence Details | (All correspondence throughout the process will be sent to these details.) |
| Name | and/or Company _ | |
| Phone | e Number _ | |
| Email | Address | |
| Posta | l Address | Post Code |
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| | ls of Site | |
| Addre | ess/Location to which | n this application relates. |
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| | | |
| Legal | Description (can be | found on the Record of Title or Rates Notice - e.g Lot x DP xxx (or valuation number)) |
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| | | |
| Owne | ers/Occupiers of the S | Site (if different from applicant above) |
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| Consent Number(s) | |
|---|--|
| Including all Variations | |
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| Date Consent Issued | |
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| Subdivision Details | |
| Date Applied for | |
| New Deposited Plan Number | |
| | |
| Stage | |
| | |
| Number of Lots (excluding roads/reserves) | |

| Cert | To be signed with | Developer Comments | WDC Comments |
|--------------------------|---|--------------------|--------------|
| 223 | Easements Amalgamation | | |
| 224f | List relevant BC's | | |
| 243 | Easement Cancellation | | |
| 224c | Consent Notice (221) Registered Bond | | |
| 239 | Reserve interests to remain | | |
| 226 and /or 241(4) | Part cancellation of existing amalgamations | | |

Approvals to be Submitted with Application

| Approval From | Developer Comments | WDC Comments |
|--|--------------------|--------------|
| Engineering approval(s) obtained and all conditions of engineering approval satisfied. | | |
| Landscape Architect (required if any private landscaping consented) | | |
| Parks and Reserves (required if reserves are vesting). | | |
| Road Names | | |
| Interests to remain on Council Reserves | | |

| To be accepted for processing your application should include the following: LT (Land Transfer) Plan | Informatio | n Required to b | be Submi | tted | | | | |
|--|----------------|---|---------------|---|--|--|--|--|
| Completed Subdivision 224c Checklist All correspondence documents in regards to the conditions Fees Information LIABILITY FOR PAYMENT - Please note that by signing and lodging this application form you are acknowledging that the Applicant in sepansible for payment of invoices and in addition will be liable to pay all costs and expenses of debt recovery and/or legal costs incurred by WDC related to the enforcement of any debt. Alist of Resource Consent Charges is available on the Fees & Charges page on the WDC website. If you are unsure of the amount to pay, please call (06) 3837309 and ask to speak to a planner. Please ensure to reference say banking payments correctly. Incorrectly referenced payments may cause delays to the processing of your application whils payment is identified. Please note that if the Applicant has outstanding balances in which case the initial fee for processing this application may be deemed not to have been paid. Payment Please reference your payments as follows: Applications yet to be submitted: RM followed by first 5 letters of applicant name e.g. DSMITH. Applications already submitted: Please use the RM# reference that has been assigned to your application, this will have been emailed to yourselfor your agent. Per solution of the payment is received (or identified if incorrectly referenced). A Fee for \$223\$ and \$224\$ application. Confirm payment by Bank transfer to account 03 0785 0070470 00 Cheque payable to Wairoa District Council attached Manual Payment at reception Reference Application & Declaration The council relies on the information contained in this application being complete and accurate. The Applicant must take all reasonable steps to ensure that it is complete and accurate and accepts responsibility for information in this application being so. Unknown by present and variant that a minyee are aware of all my/our obligation to pay all fees and administrative charges (including deth recovery and legal enpenses) payable under this application as agent of | To be accep | ted for processi | ing your a | pplication should include the following: | | | | |
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| under this application including, in particular but without limitation, my/our obligation to pay all fees and administrative charges (including debt recovery and legal expenses) payable under this application as referred to within the Fees Information section. OR | | | | If lodging this application as the Applicant | | | | |
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| Applicant in respect of the completion and lodging of this application and that the Applicant is aware of all of his/her/its obligations arising under this application including, in particular but without limitation, his/her/its obligation to pay all fees and administrative charges (including debt recovery and legal expenses) payable under this application as referred to within the Fees Information section. Signed (by or as authorised agent of the Applicant) Full name of person lodging this form | OR | | | If lodging this application as <i>agent of the Applicant</i> | | | | |
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| Full name of person lodging this form | Signed (by | or as authorica | d agont of | the Applicant) | | | | |
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