

### 1. Applicant Details

**Status of Applicant**

Property Owner       Agent

Name in Full

Postal Address

Contact Numbers

Phone

Mobile

Fax

Email

### 2. Owner Details (if different from above)

Name in Full

Postal Address

Contact Numbers

Phone

Mobile

Fax

Email

### 3. Resource Consent Conditions

My application relates to the following resource consent:

Resource Consent Number

Type of Consent

Location

Briefly describe type and location of resource consent

### 4. Changes to Resource Consent Conditions

The proposed change is as follows:      Change       Cancellation

If the application is for a change, briefly describe the change

Queen Street, P O Box 404, Te Kuiti 3941, NZ. Telephone 07-878 0800, Fax 07-878 7771, Email enquiries@waitomo.govt.nz, Website www.waitomo.govt.nz

## 5. Documents attached to Application

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 a change to, or cancellation of, the activity may have on the environment.

I attach any information required to be included in this application by the District Plan, the Regional Plan, the Resource Management Act 1991, or any regulations made under the Act.

List below all documents that you have attached

## 6. Fee Reminder

When the cost of processing the application exceeds the amount that you have paid, the Council may charge you for additional fees before or at the time the decision on your application is issued.

## 7. Applicant's Declaration

### PRIVACY STATEMENT

Information on this form is required to be provided under the Resource Management Act 1991 and is required to process the application. This information including your personal information, has to be made available to the members of the public, media and business organisations upon request. If required, it may also be made available to other departments of Council, Council's contractors and other government agencies. Under the Privacy Act 1993, you have the right to access the personal information held about you by the Council and you can also request that the Council correct any personal information it holds about you.

I confirm that I have read and understood the Privacy Statement above and that the information provided in this application is true and correct.

I also understand that as the applicant, I agree to pay all fees associated with the processing of this application.

Name (print clearly)

Signature

Date

## 8. Office Use Only

Date received

Received by

Amount paid

Receipt no