

1. Application Details

This application is for an extension of time to the following Resource Consent:

Resource Consent No. which lapses on

Site to which the application relates is described as:

Location/Street Address

Legal Description

2. Applicant Details

Status of Applicant Property Owner Agent

Name in Full

Postal Address

Contact Numbers

Phone

Mobile

Fax

Email

3. Owner Details (if different from above)

Name in Full

Postal Address

Contact Numbers

Phone

Mobile

Fax

Email

4. Written Approvals

Have you identified anyone who you consider likely to be adversely affected by the extension of time? Yes No

In respect of anyone identified as being adversely affected, have written approvals been attached? Yes No

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. Information to be Submitted with the Application

Please attach the following information in support of your application. If inadequate information is supplied with your application, this will cause delays in processing the application.

- A completed, signed application form including authorisation for site inspection and signed and dated by persons responsible for payment of fees and charges**
- A copy of the original resource consent decision and approved plans**
- A document detailing:**
 - The length of time extension sought.
 - A time line of all areas of progress since the original consent was granted.
 - The effect of the proposed time extension on the policies and objectives of the relevant District/Regional Plan or proposed plan.
 - Further explanation, if necessary, if some persons deemed to be adversely affected have not provided their written approval (as identified in the written approvals section).
- Any supporting documents/evidence showing that substantial progress or effort has been, and continues to be made towards giving effect to the consent.**

This may include marketing, arranging finance, commissioning construction plans, site investigations. Also note any impediments to progress.

6. Fees

The required deposit must be paid before any processing of the application will start.

- I enclose a deposit fee of for the processing of this application.
(Please refer to current Fees and Charges Schedule)

I/We understand that Council may invoice me for the actual and reasonable costs incurred in the processing of this application.

7. Declaration Concerning Payment of Fees

I/We understand that Council may charge me/us for all costs actually and reasonably incurred in processing this application. Subject to my/our rights under Sections 357B and 358 of the RMA to object to any costs, I/we undertake to pay all processing costs incurred by Council. Without limiting the Council's legal rights, if any steps, including the use of debt collectors, are necessary to recover unpaid processing costs, I/we agree to pay all costs of recovering those processing costs. If this application is made on behalf of a trust (private or family), a society (incorporated or unincorporated) or a company, in signing this application I/we are binding the trust, society or company to pay all the above costs and guaranteeing to pay all the above costs in my/our personal capacity.

Name (print clearly)

Signature

Date

8. Signature of Applicant

Name (print clearly)

Signature

Date

9. Office Use Only

Date received

Received by

Amount paid

Receipt no