PROPOSED WAIKATO REGIONAL PLAN CHANGE 1



WAIKATO AND WAIPĀ RIVER CATCHMENTS

Submission form on publicly notified – Proposed Waikato Regional Plan Change 1 – Waikato and Waipā River Catchments.

Important: Save this PDF to your computer before answering. If you edit the original form from this webpage, your changes will not save. Please check or update your software to allow for editing. We recommend Acrobat Reader.

SUBMISSIONS CAN BE

Mailed to

FORM 5 Clause 6 of First Schedule, Resource Management Act 1991

SubForm	PC12016	COVER SHE	ET	
FOR OFFICE USE ONLY				
		Submission Number		
Entered		Initials		
File Ref		Sheet 1 of		

Delivered to	Waikato Regional Council, 401 Grey Street, Hamilton East, Hamilton		
Faxed to	(07) 859 0998 Please Note: if you fax your submission, please post or deliver a copy to one of the above addresses		
Emailed to	healthyrivers@waikatoregion.govt.nz Please Note: Submissions received by email must contain full contact details.		
Online at	www.waikatoregion.govt.nz/healthyrivers		
	We need to receive your submission by 5pm, 8 March 2017.		
YOUR NAME A	ND CONTACT DETAILS		
Full name: Bext Cyclic 11 ung 52. Full address: 99 Sheil har la road Rhy Than 65 Email: bext 1150 @ Ladrouil. con			
Email: <u>bert</u>	- 115a & Legment, con		
Phone: <u>0</u> 7	367 5516 Fax:		
ADDRESS FOR	SERVICE OF SUBMITTER		
Full name:	Sinker From LTD		
Address for serv	ice of person making submission: 99 Swillbanknown RNU Thames		
Phone: 07 367 55 16 Fax:			
Phone: <u>07</u>	367 55 16 Fax:		
TRADE COMPE	TITION AND ADVERSE EFFECTS (select appropriate)		
OI could / O	could not gain an advantage in trade competition through this submission.		
	n not directly affected by an effect of the subject matter of the submission that: ely effects the environment, and		

does not relate to the trade competition or the effects of trade competition.

Delete entire paragraph if you could not gain an advantage in trade competition through this submission.

Chief Executive, 401 Grey Street, Private Bag 3038, Waikato Mail Centre, Hamilton 3240

THE SPECIFIC PROVISIONS OF PROPOSED PLAN CHANGE 1 THAT MY SUBMISSION RELATES TO			
Please state the provision, map or page number e.g. Objective 4 or Rule 3.11.5.1 (Continue on separate sheet(s) if necessary).			
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I SUPPORT OR OPPOSE THE ABOVE PROVISION/S			
(Select as appropriate and continue on separate sheet(s) if necessary).			
Support the above provisions			
Support the above provision with amendments			
Oppose the above provisions			
MY SUBMISSION IS THAT			
Tell us the reasons why you support or oppose or wish to have the specific provisions amended. (Please continue on separate sheet(s) if necessary).			
Tell us the reasons why you support or oppose or wish to have the specific provisions amended. (Please continue on separate sheet(s) if necessary). I fully support the principal of cleaning up our creatives as I however de nest agree with tocoghin specific industries or allocating all cost to practife industries or allocating all cost to catelorem. En industrials In tealibles each Seets catelorem.			
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I SEEK THE FOLLOWING DECISION BY COUNCIL			
(Select as appropriate and continue on separate sheet(s) if necessary).			
Accept the above provision			
Accept the above provision with amendments as outlined			
O Decline the above provision			
If not declined, then amend the above provision as outlined			

PLEASE INDICATE BY TICKING THE RELEVANT BOX WHETHER YOU WISH TO BE HEARD IN SUPPORT OF YOUR SUBMISSION				
I wish to speak at the hearing in support of my submissions.				
OI do not wish to speak at the hearing in support of my submissions.				
JOINT SUBMISSIONS				
If others make a similar submission, please tick this box if you will consider presenting a joint case with them at the hearing.	·			
IF YOU HAVE USED EXTRA SHEETS FOR THIS SUBMISSION PLEASE ATTACH THEM TO THIS FORM AND INDICATE BELOW				
Yes, I have attached extra sheets. Ono, I have not attached extra sheets.				
SIGNATURE OF SUBMITTER				
Signature: He Gridhuga Date: 6-3-2017				
Personal information is used for the administration of the submission process and will be made public. All information collected will be held by Waikato Regional Council, with submitters having the right to access and correct personal information.				

PLEASE CHECK that you have provided all of the information requested and if you are having trouble filling out this form, phone Waikato Regional Council on 0800 800 401 for help.

ADDITIONAL SHEET TO ASSIST IN MAKING A SUBMISSION				
Section number of the Plan Change:				
Do you support or oppose the provision?	◯ Support ◯ Oppose			
Submission	Decision Sought			
State in summary the nature of your submission and the reasons for it.	State clearly the decision and/or suggested changes you want Council to make on the provision.			
Section number of the Plan Change:				
Do you support or oppose the provision?	Support Oppose			
Submission	Decision Sought			
State in summary the nature of your submission and the reasons for it.	State clearly the decision and/or suggested changes you want Council to make on the provision.			