

# Transfer of records (permitted activity)

## Notes

The Waikato Regional Council's permitted activity rules have a number of conditions attached that generally relate to:

- the general activity
- the possible effects on the surrounding environment as a result of that activity.

If compliance with all the conditions of the relevant permitted activity rule can be demonstrated, the Waikato Regional Council is unlikely to have any concerns. However, if a property owner is unable to comply with any or all of the conditions they will need to cease their activity, carry out a similar activity to meet those conditions, or apply for the appropriate resource consent from the Waikato Regional Council.

This form allows us to update our records about a permitted activity. Please complete this form and provide as much detail as you can.

Remember to sign and date this form and email to [RM.Requests@waikatoregion.govt.nz](mailto:RM.Requests@waikatoregion.govt.nz) or by post to Waikato Regional Council, Private Bag 3038, Waikato Mail Centre, Hamilton 3240.

If you require further assistance, please phone our Resource Use staff on **0800 800 401**.

## Section 1: Activity details

This transfer relates to the Waikato Regional Council's records for the following activity/activities:

| Identification number/s | Activity | Activity location |
|-------------------------|----------|-------------------|
|                         |          |                   |
|                         |          |                   |

## Section 2: Current operator details (to be completed by the transferor)

|                                 |           |           |
|---------------------------------|-----------|-----------|
| <b>Full name/s</b>              |           |           |
|                                 |           |           |
|                                 |           |           |
|                                 |           |           |
|                                 |           |           |
| <b>Postal address</b>           |           |           |
|                                 | Postcode: |           |
| <b>Primary contact person/s</b> |           |           |
|                                 |           |           |
|                                 |           |           |
|                                 |           |           |
|                                 |           |           |
| <b>Email address</b>            |           |           |
| <b>Phone number/s</b>           | Home:     | Business: |
|                                 | Mobile:   |           |

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|                    |                                                                                                             |  |
|--------------------|-------------------------------------------------------------------------------------------------------------|--|
| <b>Declaration</b> | I/we wish to transfer responsibility for the above activity to the new operators detailed in Section 3.     |  |
|                    | Signature of holder or holder's agent (please indicate delegated authority):                                |  |
|                    | Date:                                                                                                       |  |
|                    | <input type="radio"/> Tick <b>only</b> if you wish to receive written notice when the transfer is complete. |  |

### Section 3: New consent holder details (to be completed by transferee)

For **individuals**, you must provide the full names of all individuals (such as John Robert Smith and Mary Jane Williams).  
 For **companies and other incorporated entities** you must provide the company name and registration number. You must also provide the name of a person or persons who will represent your company and be responsible for compliance with our rules.  
 For **partnerships** and **unincorporated** entities (such as private or family trusts or unincorporated societies), we must have the details of all authorised partners, trustees, members or officers. We may also request a copy of your society's rules to verify your status as a formal body or society.

We will send you written notice when the transfer is completed.

|                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                           |           |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| <b>Full name/s of new holder</b><br>This is the name/s that our records will be held under.<br><br>We will not hold records in the name of unregistered companies. |                                                                                                                                                                                                                                                                                                           |           |
|                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                           |           |
|                                                                                                                                                                    | Director/Minister/Chief Executive:                                                                                                                                                                                                                                                                        |           |
|                                                                                                                                                                    | Company registration number:                                                                                                                                                                                                                                                                              |           |
| <b>Postal address</b>                                                                                                                                              |                                                                                                                                                                                                                                                                                                           |           |
|                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                           |           |
|                                                                                                                                                                    | Postcode:                                                                                                                                                                                                                                                                                                 |           |
| <b>Residential address</b><br>If different from postal address                                                                                                     |                                                                                                                                                                                                                                                                                                           |           |
|                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                           |           |
|                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                           |           |
|                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                           |           |
| <b>Primary contact person/s</b>                                                                                                                                    |                                                                                                                                                                                                                                                                                                           |           |
|                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                           |           |
|                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                           |           |
|                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                           |           |
|                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                           |           |
| <b>Email address</b>                                                                                                                                               |                                                                                                                                                                                                                                                                                                           |           |
| <b>Phone number/s</b>                                                                                                                                              | Home:                                                                                                                                                                                                                                                                                                     | Business: |
|                                                                                                                                                                    | Mobile:                                                                                                                                                                                                                                                                                                   |           |
| <b>Declaration</b><br>Please make sure you are aware of your Waikato Regional Council's expectations for your activity.                                            | I/we now carry out this activity, and wish to have the Waikato Regional Council's records about the activity transferred to my/our name. I/we also understand that I/we must continue to comply with the Waikato Regional Council's permitted activity conditions, or a resource consent may be required. |           |
|                                                                                                                                                                    | Signature of holder or holder's agent (please indicate delegated authority):                                                                                                                                                                                                                              |           |
|                                                                                                                                                                    | Date:                                                                                                                                                                                                                                                                                                     |           |

**Partnership/unincorporated entity details**

For **partnerships** and **unincorporated entities** (such as private or family trusts or unincorporated bodies or societies) you must provide details of all authorised partners, trustees or members. Include details of any further partners/trustees/members on a separate page if necessary. Our records will then include these names, and all individuals will be legally responsible for the activity and any associated compliance issues. Should these persons change, then you must notify us.

|                                             |           |  |
|---------------------------------------------|-----------|--|
| <b>Name of person:</b>                      |           |  |
| <b>Status</b> (such as partner or trustee): |           |  |
| <b>Residential address:</b>                 |           |  |
|                                             |           |  |
|                                             | Postcode: |  |
| <b>Name of person:</b>                      |           |  |
| <b>Status</b> (such as partner or trustee): |           |  |
| <b>Residential address:</b>                 |           |  |
|                                             |           |  |
|                                             | Postcode: |  |
| <b>Name of person:</b>                      |           |  |
| <b>Status</b> (such as partner or trustee): |           |  |
| <b>Residential address:</b>                 |           |  |
|                                             |           |  |
|                                             | Postcode: |  |

**Occupier details**

If the occupier of the activity site differs from the property owner please provide their names and contact details.

|                                                      |           |           |
|------------------------------------------------------|-----------|-----------|
| <b>Occupier name/s</b>                               |           |           |
|                                                      |           |           |
| <b>Status</b> (such as farm manager or sharemilker): |           |           |
|                                                      |           |           |
| <b>Postal address</b>                                |           |           |
|                                                      |           |           |
|                                                      | Postcode: |           |
| <b>Email address</b>                                 |           |           |
| <b>Phone number/s</b>                                | Home:     | Business: |
|                                                      | Mobile:   |           |

**Privacy statement:**

Waikato Regional Council requires this information to process the transfer of your permitted activity and assist in managing the region's natural and physical resources. Information in this transfer is regarded as **official information**.

Council will hold this information, including all associated attachments, and it is subject to the Local Government Official Information and Meetings Act 1987 and the Privacy Act 2020. The details may also be made available to the public.

Under the Privacy Act 2020 you have the right of access to, and correction of, personal information held by the Waikato Regional Council.