



1 Dunorling Street  
PO Box 122, Alexandra 9340  
New Zealand

+64 3 440 0056  
info@codc.govt.nz  
www.codc.govt.nz

# Application For Deemed Permitted Boundary Activity

## (Form 9A) Section 87BA, Resource Management Act 1991

Email to: resource.consents@codc.govt.nz

Post to: The Chief Executive  
Central Otago District Council  
PO Box 122  
Alexandra 9340

### CONTACT DETAILS OF APPLICATION

Full name(s) and contact details of owner/occupier:

\_\_\_\_\_

Postal address

\_\_\_\_\_

Email

Phone

The full name and address of each owner (*other than the applicant*) of the site to which the proposed activity relates are as follows: (*list full names and addresses*)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Full name(s) and contact details for service of application (if different from above) e.g. Agent:

\_\_\_\_\_

Postal address

\_\_\_\_\_

Email

Phone

### DETAILS OF PROPERTY

Street address/rapid number of properties to which this application relates:

\_\_\_\_\_

\_\_\_\_\_

Legal description of land:

\_\_\_\_\_

### DETAILS OF APPLICATION

The **description** of the activity is: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## DETAILS OF AFFECTED PARTIES

The full name and address of each owner of an allotment with an infringed boundary to which the proposed activity relates as follows: *(list full names and addresses)* \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I have attached:

- CODC Form 8B written approval from each neighbor \*
- Signed plan(s) from each owner of an allotment with an infringed boundary\*
- A current Record of Title (requested within the last 3 months from LINZ)

\*Required for submitting a DPBA application, application may be returned if not provided

## PAYMENT DETAILS

Please confirm who will be sent the invoices for this application:

Agent  Applicant

I understand that a deposit will be required, and my application will not begin processing until this is paid.

Once the resource consent is lodged you will receive an invoice with details of payment.

If you do not receive an invoice within 3 working days of submitting your resource consent application please contact [resource.consent@codc.govt.nz](mailto:resource.consent@codc.govt.nz) .

## Note to Applicant:

1. You must include all information required by this form. If all information is not included, the consent authority will return this to you and the correct information must be supplied before a written notice permitting your activity can be provided.
2. In order to be eligible for a deemed permitted boundary activity, the activity must meet the definition of boundary activity under section 87AAB(1) of the Act.
3. You must provide written approval from all owners of allotments with infringed boundaries under section 87BA(1) of the Act 1991.
4. If all the information required under section 87BA(1) of the Act is provided to the consent authority, the consent authority must notify you of your permitted boundary activity within 10 working days after the date on which it receives the information.
5. You must pay the charge (if any) payable to the consent authority for the deemed permitted boundary activity under the Act.
6. If signing on behalf of a trust or company, please provide additional written evidence that you have signing authority.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Postal Address: \_\_\_\_\_

IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT THE CENTRAL OTAGO DISTRICT COUNCIL BY PHONING 03 440 0056