

Affected Persons Approval



To: The Manager, Planning and Environment
Central Otago District Council
PO Box 122
Alexandra 9340

TO BE COMPLETED BY THE PERSON(S) REQUESTING APPROVAL

Applicant(s): _____

Type of resource consent: _____

Proposed activity: _____

Location of site: _____

I have sighted all the attached plans and supporting information for the above activity.

I hereby give unconditional approval for the application to be processed without public notification.

I understand that, by giving approval, the Council will not take into account any effects that the proposed activity may have on me, when considering whether this application should be notified (Section 95E of the Resource Management Act 1991) and whether the application should be granted (Section 104(3) of the Resource Management Act 1991).

TO BE COMPLETED BY THE PERSON(S) GIVING THEIR APPROVAL

Name: _____

Organisation: _____

Address: _____

Signature

Date

Name: _____

Organisation: _____

Address: _____

Signature

Date

Checklist:

Signature of all legal owners

Site and/or subdivision plan with all required signatures

Elevations with all required signatures (if applicable)