

Application for Extension of a Lapsing Period for a Resource Consent

Section 125, Resource Management Act 1991

If you are unsure of how to complete this form it is recommended that you engage the services of a suitably qualified planning consultant to help you with your application. It is important that you answer all questions in full otherwise your application may be returned to you as incomplete. Please note that all the information provided in this application is available to the public and for statistical purposes.

A.1 APPLICANT DETAILS <small>(the name of the consent holder who will be responsible for the consent and any associated costs, unless otherwise stated in Section 11)</small>	
Full Name <small>(please write all names in full)</small> OR Name of Company Trust/Organisation <small>(Please note that if a Trust, all Trustee Names must be included)</small> Postal Address Email Phone: How do you wish to receive correspondence? (Please tick)	<div style="border: 1px solid black; height: 40px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 80px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 40px; margin-bottom: 5px; display: flex; justify-content: flex-end; padding-right: 10px;"> Post Code </div> <div style="border: 1px solid black; height: 30px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 30px; display: flex; justify-content: space-between; padding: 5px;"> Mobile phone </div> <div style="border: 1px solid black; height: 30px; display: flex; justify-content: space-between; padding: 5px;"> Post <input type="checkbox"/> E-mail <input type="checkbox"/> </div>
If you have an agent / spokesperson acting on your behalf, tick here <input type="checkbox"/> and enter their details below in A.2 <i>Please note: if you appoint an agent, the Council will contact <u>only</u> the agent regarding this application unless you specifically request otherwise. To request copies of all correspondence sent to the agent, please tick</i> <input type="checkbox"/>	

A.2 AGENT DETAILS Tick here if N/A <input type="checkbox"/>	
Company Postal Address: Email: Phone: How do you wish to receive correspondence? (Please tick)	<div style="border: 1px solid black; height: 30px; margin-bottom: 5px; display: flex; justify-content: flex-end; padding-right: 10px;"> Contact Person </div> <div style="border: 1px solid black; height: 40px; margin-bottom: 5px; display: flex; justify-content: flex-end; padding-right: 10px;"> Post Code </div> <div style="border: 1px solid black; height: 30px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 30px; display: flex; justify-content: space-between; padding: 5px;"> Mobile Phone </div> <div style="border: 1px solid black; height: 30px; display: flex; justify-content: space-between; padding: 5px;"> Post <input type="checkbox"/> E-mail <input type="checkbox"/> </div>

A.3 APPLICATION SITE DETAILS	
Site/Street Address:	Town/Location
Legal Description (from your Rates Notice or Certificate of Title)	

A.4 RESOURCE CONSENT DETAILS

Resource Consent Number:

Lapse Date:

A.5 SITE VISIT REQUIREMENTS

A site visit may be required by Council staff or authorised consultants to visit the application site for the purposes of assessing this application. Council staff will call or email the landowner or agent before going onto site.

As landowner and with the consent of any occupiers or lessees, I agree to Council staff or authorised consultants visiting the application site for the purposes of assessing this application

OR

If applicant is not the landowner

Landowner's full name:

Landowners signature

Date Signed

Email

Phone

Mobile Phone

Is there a locked gate or security system restricting access by Council staff?

Yes

No

Do you have any dogs on the property?

Yes

No

If so, will these be locked up during the site visit?

Yes

No

Please provide details of any entry restrictions/hazards that the Council staff or authorised consultants should be aware of?

E.g. health and safety matters, organic farm etc:

A.6 RULE BOOK

Waikato District Plan (Waikato Section) 2013

Proposed Plan Change(s)

Waikato District Plan (Franklin Section) 2000

National Environmental Standard

A.7 PREVIOUS ADVICE

Have you had any previous advice and/or correspondence from Council in regards to your proposal?

Yes

No

Duty Planner

Building Consent/PIM Officer

Pre application PRE

/

Name of person you received advice from

Copy of advice and/or correspondence attached

A.8 WRITTEN APPROVALS

Written approval must be provided from all parties identified by the Council as being affected by the proposal unless you have requested that your application be fully notified or notified on a limited basis (*NB. The Council has statutory authority to determine affected persons. If you are unsure as to who may be affected by your proposal or if you believe it is unreasonable to seek approval from a particular party, please contact a Council Consents Planner to discuss this matter.*)

Please note, pursuant to Section 125 (1A) (B) (ii) when determining who is affected by the proposed extension of time Council considers whether there are any persons who may be adversely affected by the granting of the proposed extension. This may include any persons who provided their written approval as part of the original application.

If written approvals are provided please tick the box

Affected Person's Written Approval forms can be downloaded from <https://www.waikatodistrict.govt.nz/your-council/forms>

Comments:

A.9 SIGNATURE

Note to Applicant

I/We understand that the Council may charge me/us all costs that are actually and reasonably incurred in processing this application. I/we undertake to pay all actual and reasonable processing costs incurred by the Council subject to my/our rights under sections 357B and 358 of the RMA to object to such costs. Without limiting Waikato District Council's legal rights, if any actions are necessary to recover unpaid processing costs or fees associated with the resource consent(s), including debt recovery fees, I/we agree to pay all costs of recovering those costs.

If this application is made on behalf of a company, society (incorporated or unincorporated) or trust, in signing this application I/we acknowledge that:

- I am/we are authorised to make this application on behalf of that company, society or trust; and
- The company, society or trust will pay the actual and reasonable costs of processing the application, including any debt recovery costs.

Signed by Applicant/s:

Dated

Note to Agent

By signing this form, I hereby certify that:

- To the best of my knowledge and belief, the information given in this application is true and correct;
- I am authorised to submit this application on behalf of the applicant/s; and
- I have explained to the applicant/s their obligation to pay all actual and reasonable processing costs incurred by Council under Section 36 of the RMA

Signed by Applicant/s and/or Agent:

Dated

Name and Role (Please print)

Please email draft conditions to me (applicant) or my agent/. I also understand that the opportunity to review the draft conditions is an act of good faith by the Council and is intended to assist with identifying errors, not to encourage debate over conditions. I further understand that the Council has the right to continue processing the consent if too much time is taken with the circulation of draft conditions. By requesting draft conditions and signing below you agree to an extension of time under section 37 of the RMA for the time it takes to resolve draft conditions.

Signed by Applicant/s or Agent:

Dated

A.10 NUMBER OF COPIES

Please provide ONE (1) complete electronic version of the application on CD or memory stick or by emailing it to applications@waikato.govt.nz and/or TWO (2) complete hard copies.

It is recommended that you separate your resource consent application/s from any other type of application you may be submitting to Council (e.g. building consent applications). In some instances a combined land use consent and subdivision is acceptable. Please discuss with a Planner prior to lodgement.

A.11 BILLING DETAILS *This identifies who will be receiving any invoices associated with processing this resource consent. By signing below you agree that you are responsible for all outstanding fees incurred during consent processing*

Full Name (please write all names in full)			
Postal Address			Post Code
Email			
Phone:		Mobile phone	
How do you wish to receive correspondence? (Please tick)	Post	<input type="checkbox"/>	E-mail <input type="checkbox"/>

The deposit applicable for your application can be found under [fees and charges](#) on the Council website

Payment Options – Please tick - NB: Council's preferred method of payment is internet banking

Please note: your application will not be processed until the required deposit is received

Internet Banking

Payment made via Internet Banking – Use the Bill Payment option for your bank, select **Waikato DC Resource Consents**, quote the property address of the activity, your name/client(s) name and the application number if known

Date of Payment

Payment Advice Information attached

Cheque

Council Offices

Payment made at Council Office Receipt Number

Date of Payment

Invoice Payment NB your application will not be processed until payment is received

Important Privacy Information

The information you provided in your application (including personal information) is official information. Your application documents, the details of this consent and any ongoing communications between you and Council will be held at Council's offices and maybe accessed upon request by a third party. Access to information held by Council is administered in accordance with the Local Government Official Information and Meetings Act 1987 and the Privacy Act 1993. Your information may be disclosed in accordance with the terms of these Acts. If you have any concerns about this, please discuss with a Council Planner prior to lodging your consent

B: Information needed for lodging your application

Your application must meet the requirements of Section 125 of the Resource Management Act 1991. To assist you with this we have developed a checklist below with some of the more common matters to be addressed.

B1: Information to be submitted with the application		Applicant <input checked="" type="checkbox"/>	Council Check <input checked="" type="checkbox"/>
B1.1	A copy of the original resource consent decision and approved plans.	<input type="checkbox"/>	<input type="checkbox"/>
B1.2	A document detailing: <ul style="list-style-type: none"> • The length of time the extension is being sought for, • A time line of all areas of progress since the original consent was granted, • The effect of the proposed time extension on the objectives and policies of the relevant operative Waikato District Plan, any proposed plan changes (if applicable) • Further explanation, if necessary, if any persons deemed to be adversely affected have not provided their written approval (as identified in the written approvals section (section A.8) of this form). 	<input type="checkbox"/>	<input type="checkbox"/>
B1.3	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, commissioning construction plans, site investigations. Also note any impediments to progress.	<input type="checkbox"/>	<input type="checkbox"/>