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	covi	ER SHEET
	FOR OFFI	CE USE ONLY	_
		Submission N	umber
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 AN	ID CONTACT DETAILS
Full address: Email: Phone:	ERVICE OF SUBMITTER
Full name:	ce of person making submission:
	Fax:
TRADE COMPE	TITION AND ADVERSE EFFECTS (select appropriate)
O I could / De	ould not gain an advantage in trade competition through this submission. not directly affected by an effect of the subject matter of the submission that:

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).

economic cost to my business a comments
bad use vestrictions
unknown compliance to my community.
costchinat wide approach-needs to be
subcostchinat specific.

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).

I believe in the principle of dranger or workings. However I am not in agreement with ringfering certain industries a attributing costs to induiduels within those. We are all responsible for the contributing fectors to the quality of ar water a targeting specific catching a sectors of the industry is not the answer. Living in a rural community, a spectry the graith of rural NZ, having moved act of when hidden I am only

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
- Decline the above provision
- If not declined, then amend the above provision as outlined

to sure of the potential negative impact this could had an our community. It seems extremely upon that certain indistries bear the built of the compliance coets a restrictions of in turn it regatively impacts on the growth of our community. All the while whom contacts continue to grow a impede the quality of water through general wastern increased demand on I tracked.

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.	
Ol 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. No, I have not attached extra sheets.	
SIGNATURE OF SUBMITTER	
Signature: Date: 6/3/17.	
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.			