Proposed Waikato Regional Plan Change 1 – Waikato and Waipa River Catchments.

Submission form on publicly notified – Proposed Waikato Regional Plan Change 1 – Waikato and Waipa River Catchments.

SubForm	PC12016	COVER SI	HEET
	FOR OFFIC	E USE ONLY	
		Submission	
		Number	
Entered		Initials	
File Ref		Sheet 1 of	

FORM 5 Clause 6 of First Schedule, Resource Management Act 1991

SUBMISSIONS CAN BE					
Mailed to	Chief Executive, 401 Grey Street, Private Bag 3038, Waikato Mail Centre, Hamilton 3240				
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 my email must contain full contact details. We also re send us a signed original by post or courier.					
Online at	www.waikatoregion.govt.nz/healthyrivers				
We need to receive your submission by 5pm, 8 March 2017.					

YOUR NAME AND CONTACT DETAILS					
Full name Elizabeth Keane					
Full address 110 Tower Rd RD1 Matamata 3471					
Email Keane.robson@xtra.co.nz Phone 021 2521507		Fax			

ADDRESS FOR SERVICE OF SUBMITTER					
Full name All contact details as above.					
Address for service of person making submission					
Email	Phone	Fax			

T	RADE COMPE	ETITION AND	ADVERSE EF	FECTS (select	appropriate)		
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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.)
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 X☐ 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 oppose the use of allocation and grandparenting. Relief sought is to use pollution levies on pollution above assimilative capacity of the land.
I oppose the use of Overseer to develop a nitrogen reference point or for any other purpose for which accurate measurement of nutrient loss is important. It is not fit for purpose as the plan requires either for absolute or relative measurement.
Relief sought is to use other tools or develop overseer until it is fit for purpose in this duty.
I oppose the timeframe of 80 years and the milestones within it. Relief sought is to use BMP firmly from day 1 combined with pollution levies to drive suitable land use that will reduce the 4 pollutants.
I oppose the use of the dairy-centric economic models by a dairy economist to develop the plan costings. Relief sought is to use transparent peer reviewed economic models which include all externalities.
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 below Decline the above provision If not declined, then amend the above provision as outlined below

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PLEASE INDICATE BY TICKING THE RELEVANT BOX WHETH YOUR SUBMISSION	IER YOU WISH TO BE HEARD IN SUPPORT OF
☐ I wish to speak at the hearing in support of my submiss	sions.
X I do not wish to speak at the hearing in support of my	submissions.
JOINT SUBMISSIONS	
	ox if you will consider presenting a joint case with them at
IF YOU HAVE USED EXTRA SHEETS FOR THIS SUBMISSION INDICATE BELOW	PLEASE ATTACH THEM TO THIS FORM AND
☐ I have not attached extra sheets.	
SIGNATURE OF SUBMITTER	
(or person authorised to sign on behalf of submitter) A signature is not required if you make your submission by electrons.	onic means
7. Signature is not required if you make your submission by circuit	
Signature	Date
Personal information is used for the administration of the scollected will be held by Waikato Regional Council, with su information.	submission process and will be made public. All information bmitters having the right to access and correct personal

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.

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Additional sheet to assist in making a submission

Section number of the Plan Change	Support /Oppose	Submission	Decision sought
Please refer to title and page numbers used in the plan change document	Indicate whether you support or oppose the provision.	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.

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