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

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

SubForm	PC12016	COVER SHEE	COVER SHEET	
	FOR OF	FICE USE ONLY		
		Submission Number		
Entered		Initials		
File Ref		Sheet 1 of		

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 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 A	ND CONTACT DETAILS
Full name: C	rgham Bell
	15 Mahuta Rd South RD6 Thames
Full address:	
	rewplains 9 tha . CO.NZ
Phone: <u>り</u> え	7.2801611 Fax:
ADDRESS FOR	SERVICE OF SUBMITTER
Full name: 150	illuriu Plains NTD
Address for serv	ice of person making submission: 95 Mchula Rd South 206 Thames
Email: Della	iomplaine orm. co NZ
	2801611 Fax:
Phone: Va	- Z 90 18 (1
TRADE COMPE	TITION AND ADVERSE EFFECTS (select appropriate)
O1 could / O	could not gain an advantage in trade competition through this submission.
_	not directly affected by an effect of the subject matter of the submission that:
	ely effects the environment, and
(b) does no	ot relate to the trade 🏈 mpetition or the effects of trade competition.

Delete entire paragraph if you could not gain an advantage in trade competition through this submission.

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).
restriction on land use
Set back of fences from drains
Set back of fences from drains personal over 15d restriction on cropping or working of land over 15d cost on my business need to have a subcatchment apporach rather
restriction on cropping or working or large
cost on my business
need to have a subcatchment apporach rather
than a branket approach
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 think the expreach to clean up our waterway is worth while
I water way
15 WORTH WHILE
The cost of this should not target specific
industries this should be spread accross all of our communitys
$11 \uparrow$
all of our communitys
•
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

. 150 c / 11 (2-19/16)

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. I do not wish to speak at the hearing in support of my submissions. JOINT SUBMISSIONS Mo 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. SIGNATURE OF SUBMITTER Signature: Date: 6 - 3 - 1 7 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.
O I do not wish to speak at the hearing in support of my submissions. JOINT SUBMISSIONS No 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 O Yes, I have 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
JOINT SUBMISSIONS No 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
IF YOU HAVE USED EXTRA SHEETS FOR THIS SUBMISSION PLEASE ATTACH THEM TO THIS FORM AND INDICATE BELOW Yes, I have 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
IF YOU HAVE USED EXTRA SHEETS FOR THIS SUBMISSION PLEASE ATTACH THEM TO THIS FORM AND INDICATE BELOW O Yes, I have 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
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
Signature: Date: 6.3.17 Personal information is used for the administration of the submission process and will be made public. All information collected
Signature: Date: 6 · 3 · 17 Personal information is used for the administration of the submission process and will be made public. All information collected
Personal information is used for the administration of the submission process and will be made public. All information collected

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.				