PROPOSED WAIKATO REGIONAL PLAN CHANGE 1



WAIKATO AND WAIPĀ RIVER CATCHMENTS

MandatoryquestionsformforsubmissionsonProposed Waikato Regional Plan Change 1 – Waikato and Waipā River Catchments.

Important: Save this PDF to your computer before answering. Please check or update your software to allow for editing. We recommend Acrobat Reader.

FORM 5, Resource Management Act 1991

SubForm	PC12016	COVE	R SHEET
FOR OFFICE USE ONLY			
		Submission Nu	ımber
Entered		Initials	
File Ref		Sheet 1 of	

THIS FORM CAN I	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		
Taxed to	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		
YOUR NAME AND CONTACT DETAILS - please ensure these details match those on your original submission			
Full name:			
Full address:			
Email:			
	Fax:		
TRADE COMPETITION AND ADVERSE EFFECTS (select appropriate)			
OI could / Could not gain an advantage in trade competition through this submission.			
\bigcirc I am / \bigcirc am not directly affected by an effect of the subject matter of the submission that:			
(a) adversely effects the environment, and(b) does not relate to the trade competition or the effects of trade competition.			
	BY TICKING THE RELEVANT BOX WHETHER YOU WISH TO BE HEARD IN SUPPORT OF YOUR		
SUBMISSION			
OI wish to speak at the hearing in support of my submissions.			
	speak at the hearing in support of my submissions.		
JOINT SUBMISSION			
	a similar submission, please tick this box if you will consider presenting a joint case with them at the hearing.		
SIGNATURE OF SUBMITTER - note you can also type your name to certify the above information is true and correct			
Signature:	Date:		

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.

Consultee Josh Moore (70530)

Email Address josh@duoplus.nz

Address 39 Cumberland Drive

Hamilton 3210

Event Name Proposed Waikato Regional Plan Change 1

Comment by Josh Moore

Comment ID PlanChange134

Response Date 16/11/16 08:51

Consultation Point Objective 1: Long-term restoration and protection of water

quality for each sub-catchment and Freshwater

Management Unit/Te Whāinga 1: Te whakaoranga tauroa me te tiakanga tauroa o te kounga wai ki ia riu kōawaawa

me te Wae Whakahaere i te Wai Māori (View)

Status Submitted

Submission Type Web

Version 0.1

State whether you support or oppose the provision being submitted on, or wish to have amendments made. You can also upload file attachments that support your submission.

I SUPPORT OR OPPOSE THESE PROVISION/S

Support these provisions

Tell us the reasons why you support or oppose or wish to have the specific provisions amended.

MY SUBMISSION IS THAT:

Would be great if the goal was a shorter timeframe, but it is a big challenge. So yes, I support this target.

Decision sought

Select as appropriate.

I SEEK THE FOLLOWING DECISION BY COUNCIL

Consultee Josh Moore (70530)

Email Address josh@duoplus.nz

Address 39 Cumberland Drive

Hamilton 3210

Event Name Proposed Waikato Regional Plan Change 1

Comment by Josh Moore

Comment ID PlanChange135

Response Date 16/11/16 08:56

Consultation Point Objective 3: Short-term improvements in water quality in the

first stage of restoration and protection of water quality for each sub-catchment and Freshwater Management Unit/Te Whāinga 3: Ngā whakapainga taupoto o te kounga wai i te wāhanga tuatahi o te whakaoranga me te tiakanga o te kounga wai i ia riu kōawāwa me te Wae Whakahaere Wai Māori (View)

Status Submitted

Submission Type Web

Version 0.1

State whether you support or oppose the provision being submitted on, or wish to have amendments made. You can also upload file attachments that support your submission.

I SUPPORT OR OPPOSE THESE

PROVISION/S

Support these provisions

Decision sought

Select as appropriate.

I SEEK THE FOLLOWING DECISION BY .

COUNCIL

Accept the provision

Consultee Josh Moore (70530)

Email Address josh@duoplus.nz

Address 39 Cumberland Drive

Hamilton 3210

Event Name Proposed Waikato Regional Plan Change 1

Comment by Josh Moore

Comment ID PlanChange136

Response Date 16/11/16 08:57

Consultation PointObjective 4: People and community resilience/Te

Whāinga 4: Te manawa piharau o te tangata me te hapori

(View)

Status Submitted

Submission Type Web

Version 0.1

State whether you support or oppose the provision being submitted on, or wish to have amendments made. You can also upload file attachments that support your submission.

I SUPPORT OR OPPOSE THESE PROVISION/S Support these provisions

Decision sought

Select as appropriate.

I SEEK THE FOLLOWING DECISION BY

COUNCIL

Accept the provision

Consultee Josh Moore (70530)

Email Address josh@duoplus.nz

Address 39 Cumberland Drive

Hamilton 3210

Event Name Proposed Waikato Regional Plan Change 1

Comment by Josh Moore

Comment ID PlanChange137

Response Date 16/11/16 08:57

Consultation Point Reasons for adopting Objective 1 (View)

Status Submitted

Submission Type Web

Version 0.1

State whether you support or oppose the provision being submitted on, or wish to have amendments made. You can also upload file attachments that support your submission.

I SUPPORT OR OPPOSE THESE PROVISION/S Support these provisions

Decision sought

Select as appropriate.

I SEEK THE FOLLOWING DECISION BY COUNCIL . Accept the provision