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

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

SubForm	PC12016	COVER SHEET		
FOR OFFICE USE ONLY				
		Submission Number		
Entered	T	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 AN	ID CONTACT DETAILS		
Full name:	eter and Sandi Thompson		
Full address:			
	mpsfamily@xtra.co.nz		
Phone: O2	7 7131733 Fax:		
ADDRESS FOR S	SERVICE OF SUBMITTER		
Address for servi	ce of person making submission: 1011 Karheve Road, RO1, Ngatca 359-		
Email: thompstanily@xtra.co.DZ			
Phone: 027 7131738 · Fax:			
TRADE COMPE	ITION AND ADVERSE EFFECTS (select appropriate)		
TRADE COMPE	THOM AND ADVERSE EFFECTS (select appropriate)		
OI could / 🛇	ould not gain an advaptage in trade competition through this submission.		
I am / am not directly affected by an effect of the subject matter of the submission that:			
	ly effects the environment, and		
(b) does no	t 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.

Please state the projection, map or page pumber eq objective 4 of Rule 3.11.5.1 (continue on separate sheet(a) if pressary). E-coli-Specifying point Source of E-coli. Needlad. Givand parenting of nutrients / contaminents as it will limit futive production increases which will economically affect our business and community clue to having to reduce Staff members. Fencing 4 cultivation setbacks from drains will affect the productivity of our land 4 the value of our land the productivity of our land 4 the value of our land by the productions eight futire apportunities, purchasing any stack had use restrictions eight future apportunities, purchasing any stack had use restrictions eight compliance, eight overseer, faim envilonment plants upport on oppose the Above provisions I support the above provisions Osupport 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(a) if necessary). We believe we need to look after our water ways in Saying that we believe everybody heeds to do their part eight urban, forestry. We do not believe Specific industries should be targeted. Clean up of our waterways for the future of NZ.
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
Accept the above provision with amendments as outlined
Decline the above provision
If not declined, then amend the above provision as outlined
letand in the type

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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.				
OI do not wish to speak at the hearing in support of my submissions.				
JOINT SUBMISSIONS				
OIf 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.

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
Do you support or oppose the provision? Submission	Support Oppose Decision Sought