# 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 SHEET	Γ
	FOR OFFIC	E USE ONLY	
· · · · ·		Submission	
		Number	
	<u> </u>		
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 <b>Please Note:</b> if you fax your submission, please post or deliver a copy to one of the above addresses	
Emailed to	<u>healthyrivers@waikatoregion.govt.nz</u> <b>Please Note:</b> Submissions received my email must contain full contact details. We also request you 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: Rachel Ann Cave			
Full address: 206 Golf Rd RD5 Te Awamutu			
Email: cave99rachel@gmail.com	Phone: 0273480419	Fax	

ADDRESS FOR SERVICE OF SUBMITTER		
Full name		
Address for service of person making se	ubmission	
Email	Phone	Fax

#### TRADE COMPETITION AND ADVERSE EFFECTS (select appropriate)

I could not gain an advantage in trade competition through this submission.

I am 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.

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.)*

3.11.5.1;3.11.5.2, schedule A and schedule C

#### I SUPPORT OR OPPOSE THE ABOVE PROVISION/S

(select as appropriate and continue on separate sheet(s) if necessary.)

I 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 proposed changes as these changes will make most properties unfeasible for use that most people who own them purchased them in the first place for. If stock numbers are at the rates proposed, then all or most equine businesses will become unfeasible as the flexibility to have more or less horses at any given time, as this is the nature of my business and many more equine businesses in the Waikato.

The costs involved with providing the nutrient data along with loss of property use will cripple most lifestyle block owners, and this data is potentially difficult to collect for the equine industry.

I do support the fencing of waterways to exclude stock from them.

## I SEEK THE FOLLOWING DECISION BY COUNCIL

(select as appropriate and continue on separate sheet(s) if necessary.)

Decline the above provision

Amend as follows:

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.

#### 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

No, I have not attached extra sheets.

<b>SIGNATURE OF SUBMITTER</b> (or person authorised to sign on behalf of submitter) A signature is not required if you make your submission by electro	onic means.	
Signature	Date 8.3.2017	
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	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.

.