# PROPOSED WAIKATO REGIONAL PLAN CHANGE 1



# WAIKATO AND WAIPĀ RIVER CATCHMENTS

Submission form on publicly notified – Proposed Waikato Regional Plan Change 1 – Waikato and Waipä 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.

SubForm	PC12016	COVER SHEE	т
	FOR OFF	ICE USE ONLY	
		Submission Number	
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FORM 5 Clause 6 of First Schedule, Resource Management Act 1991

SUBMISSIONS CAN BE	
Chief Executive, 401 Grey Street, Private Bag 3038, Waikato Mail Centre, Hamilton 3240	
Waikato Regional Council, 401 Grey Street, Hamilton East, Hamilton	
(07) 859 0998 <b>Please Note:</b> if you fax your submission, please post or deliver a copy to one of the above addresses	
healthyrivers@waikatoregion.govt.nz Please Note: Submissions received by email must contain full contact details.	
www.waikatoregion.govt.nz/healthyrivers	

#### YOUR NAME AND CONTACT DETAILS

Full name: \_\_\_\_\_\_\_

Full address: \_\_\_\_\_\_\_

Email: \_\_\_\_\_

07 8289596 or 027 4312092

\_\_\_ Fax: \_\_

#### ADDRESS FOR SERVICE OF SUBMITTER

Full name: \_

Address for service of person making submission:

Email: \_\_\_\_

Phone:

\_\_\_\_ Fax: \_\_

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

 $\bigcirc$  I could /  $\odot$  could not gain an advantage in trade competition through this submission.

 $\odot$  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.

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

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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 sheel(s) if necessary).

3.11.5.3 - 3, 4 and 5

#### 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).

There are a large number of horses that for their health and well being cannot be solely fed on a grass based diet. The stocking rate of 6/hectare appears to relate to grass being their sole diet. The remaining pasture therefore needs to be managed and on a small property it is extremely difficult to get contractors to convert that pasture to supplementary feed. It is also not cost effective to do this so there could well be instance of grassland converting to scrub and gorse and in turn become totally unproductive and an eyesore. Another thing of concern is the need to apply for a consent for any alterations to what exists. This would mean that if the Club held an overnight camp and had extra horses for only a few nights then a resource consent would need to be sought. This would become a very onerous burden on a group of volunteers in a Club which caters for a community of limited resources.

#### I SEEK THE FOLLOWING DECISION BY COUNCIL

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

O Accept the above provision

O Accept the above provision with amendments as outlined

• Decline the above provision

 $\bigcirc$  If not declined, then amend the above provision as outlined

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.				
O I do not 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				
Yes, I have attached extra sheets. No, I have not attached extra sheets.				
SIGNATURE OF SUBMITTER				
Signature: Phy Maylor PKESIDorf				
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:

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.

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•	
Do you support or oppose the provision?	◯ Support ◯ Oppose
	Support Oppose
Do you support or oppose the provision?	