# 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.

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

SubForm	PC12016	COVER SHEET
	FOR OF	FICE USE ONLY
		Submission Number
Entered		Initials

We need to receive your submission by 5pm, 8 March 2017.				
Online at	www.waikatoregion.govt.nz/healthyrivers			
Emailed to	healthyrivers@waikatoregion.govt.nz Please Note: Submissions received by email must contain full contact details.			
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			
Delivered to	Waikato Regional Council, 401 Grey Street, Hamilton East, Hamilton			
Mailed to	Chief Executive, 401 Grey Street, Private Bag 3038, Waikato Mail Centre, Hamilton 3240			
SUBMISSIONS				

YOUR NAME AND CONTACT DETAILS
Full name: Wayne Beacker Full address: 754 Findlay PA. Email: Wayne O milling machines. CE. NE Phone: E: 8677860 Fax: 078677120
Full name:
Email:
Phone: Fax: Fax:
TRADE COMPETITION AND ADVERSE EFFECTS (select appropriate)
<ul> <li>I could / Could not gain an advantage in trade competition through this submission.</li> <li>I am / Could am not directly affected by an effect of the subject matter of the submission that:</li> <li>(a) adversely effects the environment, and</li> <li>(b) does not relate to the trade competition or the effects of trade competition.</li> </ul> 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).

O General income tom thin O General income and Beet/sincep/dainy O Cost to my business. . . How on to commity.

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

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

O Support the above provisions

O 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).

We tully support eleer weders cromed New Zeeland however we need to be elser on the cont with here an appeal of small businessel. - committee,

#### I SEEK THE FOLLOWING DECISION BY COUNCIL

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

Accept the above provision

O Accept the above provision with amendments as outlined

O Decline the above provision

OIf not declined, then amend the above provision as outlined

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PLEASE INDICATE BY TICKING THE RELEVANT BOX WHET	HER YOU WISH TO BE HEARD IN SUPPORT OF YOUR
O I wish to speak at the hearing in support of my submissions	
(1) do not wish to speak at the hearing in support of my subm	nissions.
O If the phake a similar submission, please tick this box if y	you will consider presenting a joint case with them at the hearing.
IF YOU HAVE USED EXTRA SHEETS FOR THIS SUBMISSION	N PLEASE ATTACH THEM TO THIS FORM AND
Yes, I have attached extra sheets.	No, I have not attached extra sheets.
SIGNATURE OF SUBMITTER	
Signature: D	Date: 6/3/2517.
Personal information is used for the administration of the subr will be held by Waikato Regional Council, with submitters having	nission process and will be made public. All information collected ng 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.

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# 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?	O Support O 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.			