## **Written Persons Approval for Resource Consent**



(Form 8A)
Section 95E(3), Resource Management Act 1991

Email to: resource.consents@codc.govt.nz

Post to: The Chief Executive

Central Otago District Council

PO Box 122 Alexandra 9340 1 Dunorling Street PO Box 122, Alexandra 9340 New Zealand

+64 3 440 0056 info@codc.govt.nz www.codc.govt.nz

TO BE COMPLETED BY THE PERSON(S) REQUESTING APPROVAL		
Applicant Name:		
Type of resource consent (circle all appropriate): Land-use / subdivision		
Proposed activity:		
Location of site:		
CONTACT DETAILS OF AFFECTED PARTY  Full Name/s: (name of person giving written approval)		
Email Phone		
Address of the property (I am the owner of the following property):		
The full name of all other owners of the property: (owners of the affected property)		
I have authority to sign on behalf of all the other owners of the property:		

☐ Yes

☐ No other owners

## **NOTES**

Conditional written approvals cannot be accepted.

There is no obligation to sign this form, and no reasons need to be given.

If this form is not signed, the application may be notified with an opportunity for submissions.

If signing on behalf of a trust or company, please provide additional written evidence that you have signing authority.

## **DECLARATION**

$\Box$ I have sighted all the attached plans and su	pporting information for the above activity.
☐I have read the full application for resource any site plans as follows	consent, the Assessment of Environmental Effects, and
	d that the consent authority must decide that I am no authority must not have regard to any adverse effects on
	approval by giving written notice to the consent or, if there is not, before the application is determined.
Signature	Date

If you have any questions, please contact the Central Otago District Council by phoning 03 440 0056 or email <a href="mailto:resource.consents@codc.govt.nz">resource.consents@codc.govt.nz</a>