## tten Persons Approval for Resource Consent



1 Dunorling Street PO Box 122, Alexandra 9340 New Zealand

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

## (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

|                  | LETED BY THE PERSON(S) REQUESTING APPROVAL                             |              |
|------------------|--|--------------|
| pplicant Name:   | Natasha Williams   |              |
| ype of resource  | e consent (circle all appropriate): Land-use) subdivision              |              |
| roposed activit  | Family accommodation   | <u></u>      |
|                  |  |              |
| ocation of site: | 353 Dunstan Road   |              |
|                  |  |              |
| CONTACT D        | DETAILS OF AFFECTED PARTY  |              |
| Full Name/s: (r  | name of person giving written approval) Allan Lyndsay Ru               | Alex         |
| Email            | 339@hotmail.com  Phone 02722964  | TI -         |
| Address of the   | property (I am the owner of the following property): 351 Director      | Roo          |
| ROI              | Alexandra 9391   |              |
| The full name of | of all other owners of the property: (owners of the affected property) |              |
|                  |  |              |
|                  |  |              |
| A A              |  | <del>-</del> |
| I have authorit  | ty to sign on behalf of all the other owners of the property:          | _ /          |

Affected Persons Approval Resource Consent Revised 10/23

## 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**

I have sighted all the attached plans and supporting information for the above activity.

Heave read the full application for resource consent, the Assessment of Environmental Effects, and any site plans as follows

In signing this written approval, I understand that the consent authority must decide that I am no longer an affected person, and the consent authority must not have regard to any adverse effects on me.

I understand that I may withdraw my written approval by giving written notice to the consent authority before the hearing, if there is one, 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 resource.consents@codc.govt.nz