Private Bag 704 Hokitika 7842 New Zealand



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Website: www.westlanddc.govt.nz

## **APPLICATION FOR SECTION 87BB (RMA) PERMITTED ACTIVITIES Marginal or temporary non-compliance**

For activities that would otherwise be a permitted activity, except for a marginal or temporary non-compliance with a rule in the District Plan, there is the potential for Council to consider these activities are permitted activities.

The information required from you on the following application form is an opportunity for you to provide as much detail as you can to assist the Council with their decision making on your activity.

Please note that in accordance with Section 87BB the consent authority must have recommend you apply for this certificate.

1. Applicant De	tails:
Name/s:	
Contact Person:	
(name and designation)	
Contact Number:	Email:
Postal Address:	
(or alternative method of service under	
section 352 of the Act)	Post Code:
2. Owner Detail	s:
Property Owner	
Name/s: (If different from above)	
Contact Number:	Email:
Postal Address: (or alternative method	
of service under	
section 352 of the Act)	Post Code:
3. Address for	Correspondence: Name and address for service and correspondence (if using an Agent, write their details).
Name/s:	
Contact Person: (name and designation)	
Contact Number:	Email:
Postal Address:	
(or alternative method	
of service under section 352 of the Act)	
	Post Code:

All correspondence will be sent by email. Please advise us if you would prefer an alternative means of communication.

Site Address/ Location:	
Legal Description:	
(From rates notice, valuation notice or Certificate of Title)	
Zone ODP:  (Please ask Council staff or Westland District Plan if unsure)	
Record of Title: Val Number:	
Please remember to attach a copy of your Record of Title to the application, along with relevant consent notices and/or ease encumbrances (search copy must be less than 3 months old)	ments and
Site Visit Requirements:  Note that a site visit will be undertaken as part of the application process.  Is there a locked gate or security system restricting access by Council staff?	∐Yes ∐No
Is there a dog on the property?	Yes No
Please provide details of any other entry restrictions that Council staff should be aware of, e.g. health caretaker's details. This is important to avoid a wasted trip and having to re-arrange a second visit.	and safety,
6. Activity Details:	
Please enter a brief description of the proposal here. Attach a detailed description of the proposed adrawings (to a scale of 1:100) to illustrate your proposal. Please refer to the Council's Operative Dist Te Tai o Poutini Plan for guidance, notes, and further details of information requirements.	
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	environmental effects of the activity. Include as much detail as you can I scale of the effects you identify:	including the
	sider that the adverse environmental effects identified above are differer n they would be in the absence of the marginal or temporary non-complia	
For each of the adverse	e effects identified, consider if these effects on any person are less than	minor, minor or more
	u provide your reasoning for each opinion:	
	or entity that will be responsible for paying any invoices or receiving any refundences also refer to Council's Fees and Charges Schedule.	s associated with processing
Name/s: (please write all names in fu		
Email Address:		
Postal Address:		
	Post Code:	
Contact Number:		
Once the application has be pursuant to Section 87BB y Processing will not begin ur	fundable fixed fee is required for processing this application and is set out in Councils Feen sent, you will receive a formal acknowledgement and an invoice. If the application is ou will be formally notified in writing. til the invoice has been paid. Please note that if the deposit fee is insufficient to cover the the application you will be required to pay any additional costs. Invoiced amounts are paid.	returned as incomplete e actual and reasonable costs of
processing this application. future processing costs inc agencies) are necessary t application is made on beha	<b>ayment</b> : I/we understand that the Council may charge me/us for all costs actually Subject to my/our rights under Sections 357B and 358 of the RMA, to object to any costs urred by the Council. Without limiting the Council's legal rights if any steps (including or recover unpaid processing costs I/we agree to pay all costs of recovering thos lift of a society (incorporated or unincorporated) or a company in signing this application I we costs and guaranteeing to pay all the above costs in my/our personal capacity.	s, I/we undertake to pay all and g the use of debt collection e processing costs. If this
Name:		
Signature of bill payer:		
(mandatory - please print and sign)	Date:	

## **13.** Important Information:

## **Privacy Information**:

Once this application is lodged with the Council it becomes public information. Please advise Council if there is sensitive information in the proposal. The information you have provided on this form is required so that your application consent pursuant to the Resource Management Act 1991 can be processed under that Act. The information will be stored on a public register and held by the Westland District Council. The details of your application may also be made available to the public on the Council's website, <a href="www.westlanddc.govt.nz">www.westlanddc.govt.nz</a>. These details are collected to inform the general public and community groups about all consents which have been issued through the Council.

ame:							
ignature:						Date:	
nandatory -	- please print and sig	n, or sign digitally)					
<b>.</b> 4.	Application Ch	ecklist: (please	tick if informat	ion is provided)			
Con	npleted application	form (this form)					
Site	Plan to assist with	understanding o	of the proposed	d activity			
formation i		ded with an appli	ication. Please	also refer to the	information av	ites, and further det ailable on the Coun	

Only one copy of an application is required, but please note for copying and scanning purposes,

all attached documentation should be no larger than A3 in size.