

Written Approval of Affected Persons Form 8A

Section 95E, Resource Management Act 1991

Passuras Cancent Applicant's Details	
Applicant(s) name (please write all names in full): Consent number (if known):	
Affected Person's Details	
Full name(s) (please list the full names of all persons and/organisations providing their written approval	1):
A.	
B.	
C.	7
Tick whether you are the:	_
Owner Occupier Other (please specify)	
Address of affected property:	\neg
Details of Proposal	
I/We hereby give written approval to the following activity that is the subject of a resource conseapplication (please provide a brief description of the proposed activity):	nt
Address of proposed activity:	_
The state of the s	\neg

Information Sighted I have read or sighted the following information: 1. Full application for resource consent 2. Assessment of Environmental Effects 3. Plans as follows (Please list plan title, author and date): Declaration I/We have signed each page of the plans in respect of the proposal. These need to accompany this form. I/We understand that by giving my/our written approval, the Council when considering the application cannot take account of any actual or potential effects of the activity on my/our property. I/We understand that at any time before the hearing, if there is one, or, if there is not, before the application is determined, I/we may give notice in writing to the Council that this approval is withdrawn. Note: You should only sign below if you fully understand the proposal. If you require the resource consent process to be explained you can contact the Customer Service Team at the Council who can provide you with information.

Privacy Information: The Council requires the information you have provided on this form to process your application under the RMA and to collect statistics. The Council will hold and store the information, including all associated reports and attachments, on a public register. The details may also be made available to the public on the Council's website. These details are collected to inform the general public and community groups about all consents which have been processed or issued through the Council. If you would like to request access to, or correction of any details, please contact the Council.

Date:

Date:

Date:

Notes to affected person signing written approval

Conditional written approvals cannot be accepted.

Signature(s):

Signature(s):

Signature(s):

A.

В.

C.

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.