Schedule 15

1.

e)

purpose?



NOTICE OF TRANSFER OF HOLDER OF PERMIT

Pursuant to Sections 134, 135, 136 and 137 of the Resource Management Act 1991.

Transferee – person/s who wish to hold and use the consent or permit in the future

Transferor – person/s who currently holds and uses the consent or permit

Permit/Consent Number: or Mining Privilege Number: Yes Is the current permit for a No a) Land Use Consent Coastal Permit П П Discharge Permit Deemed Permit П Water Permit to dam П Water Permit to divert Water Permit to take water Does the transferee own the site for which the permit is granted? b) Yes Does the transferee occupy the site for which the permit is granted? c) *If no, proof of the right to occupy the site will be required Yes What is the current purpose of the consent or permit? d)

f) Are you seeking to transfer the ownership of a resource consent that already has a replacement application lodged with Council?

Yes No

No

Yes

If yes, what is the consent number of the replacement application?

Will the Transferee continue to use the consent or permit for its current

g) Do you seek to become an applicant to the replacement application?
Yes No

^{*}If yes, please complete <u>Form 23 Change of Applicant</u> available on our website and lodge along with this Transfer Form.

a)	Does the Transferor intend to transfer the permit for a limited period only? Yes No					
	If ye	s, please state date period/ to/				
b)	Plea used	se provide the legal description/s of the land/s where the water is being				
c)	(i)	Has the water permit been exercised within the past 5 years? Yes / No				
	(ii)	Have you provided evidence of this use in the past to Council? Yes / No				
	Note: if you answered No to d(ii), please attach evidence of the dates and amounts of water take for this period, as per conditions of the consent to be transferred. There will be delays and costs processing the transfer if no evidence has been provided either in the past or with this application.					
I/we		to transfer: Full interest.				
	☐ Share. Please define share/s:					
		nares are not already defined on the permit/consent/mining privilegethen the signatures on all of the consent o				
<u>Trar</u>	nsfer	or Details: (transferred from)				
Full	Name	els *If transfer involves a Trust or Partnership, please print <u>all</u> names in full				
Post	al Ad	dress				
		Post Code:				
Add	ress f	or Service (not a PO Box)				
		Post Code:				

Daytime Phone No:				
Email:				
Otago Regional Council is moving to a paperless cor including consents will besent via email, unless you red				
electronic means, please tick $ \Box $				
Signature/s of all <u>Transferor/s</u> *or person author holder/s	rised to sign on beh	alf of curre	ent permit	
Name <i>please print</i>				
			1	
Signature		Date		
Name <i>please print</i>				
Signature		Date		
Name <i>please print</i>				
Signature		Date		/
<u>Transferee Details:</u> (transferred to)				
	ip, please print <u>all</u> n	names in fu	ıll	
Full Name/s *If transfer involves a Trust or Partnersh	ip, please print <u>all</u> n	ames in fu	dl	
Full Name/s *If transfer involves a Trust or Partnersh	ip, please print <u>all</u> n			
Full Name/s *If transfer involves a Trust or Partnersh	ip, please print <u>all</u> n			
Full Name/s * If transfer involves a Trust or Partnersh Postal Address	ip, please print <u>all</u> n			
Full Name/s * If transfer involves a Trust or Partnersh Postal Address	ip, please print <u>all</u> n			
Full Name/s * If transfer involves a Trust or Partnersh Postal Address	ip, please print <u>all</u> n	_ Post (Code: _	
Full Name/s *If transfer involves a Trust or Partnersh Postal Address Address for Service (not a PO Box)		Post Co	Code: _	
Transferee Details: (transferred to) Full Name/s *If transfer involves a Trust or Partnersh Postal Address Address for Service (not a PO Box) Daytime Phone No: Email:		Post Co	Code: _	

5.

electronic means, please tick \square

				,
Name please print				
			,	1
Signature		Date		
Name <i>please print</i>				
Signature		Date		
Name please print				
Signature		Date	/	<u> </u>
Please send this transfer to Co subject line.	mpliance@orc.govt.nz and inc	lude tran	sfer in	the
Otherwise, return this form to:	Compliance Support Officer Transfer Otago Regional Council Private Bag 1954 Dunedin 9054			

Signatures of all **Transferee/s** (or person authorised to sign on behalf of transferee/s):

A \$200 fee must accompany your Notice of Transfer.

Payments can be made via direct credit, please use the **Transferee name** and **transfer** as a reference when paying the deposit:

Bank: BNZ (George Street, Dunedin)
Account name: Otago Regional Council
Account number: 02 0900 0532547 00
Reference: Transferee name and transfer

Or for alternatives ways to pay go to www.orc.govt.nz/payit Do it Online, Pay it.

APPLICATION CHARGES

\$200.00 fee for each transfer (including a mining privilege).