Submission on a notified proposal for policy statement or plan change or variation

Clause 6 of Schedule 1, Resource Management Act 1991 FORM 5

8



For office use only Send your submission to unitaryplan@aucklandcouncil.govt.nz or post to : Submission No: Attn: Planning Technician **Auckland Council** Receipt Date: Level 24, 135 Albert Street Private Bag 92300 Auckland 1142 Submitter details Full Name or Name of Agent (if applicable) Mr/Mes/Mios/Ms(Full Name) Organisation Name (if submission is made on behalf of Organisation) Address for service of Submitter Telephone: Contact Person: (Name and designation, if applicable) Scope of submission This is a submission on the following proposed plan change / variation to an existing plan: Plan Change/Variation Number PC 42 Plan Change/Variation Name Auckland Regional Landfill Wayby Valley The specific provisions that my submission relates to are: (Please identify the specific parts of the proposed plan change / variation) Plan provision(s) **Landfill Precinct** Or Property Address 1232 State Highway 1, Wayby Valley Or Map Other (specify) Submission My submission is: (Please indicate whether you support or oppose the specific provisions or wish to have them amended and the reasons for your views) I support the specific provisions identified above I oppose the specific provisions identified above I wish to have the provisions identified above amended No \square Yes 🗌

The proposal is conflicts with sound resource management principles; the purpose and principles of the Resource Management Act 1991, the Auckland Unitary Plan, National Policy Statements on Freshwater Management; Waste Minimisation Act 2008 and the Auckland Council Waste Management and Minimisation Plan. I object to one off bespoke objectives, policies and rules being applied to this site. See attached information. I seek the following decision by Council: Accept the proposed plan change / variation Accept the proposed plan change / variation with amendments as outlined below Decline the proposed plan change / variation 251.1 If the proposed plan change / variation is not declined, then amend it as outlined below. \checkmark I wish to be heard in support of my submission I do not wish to be heard in support of my submission If others make a similar submission, I will consider presenting a joint case with them at a hearing Signature of Submitter (or person authorised to sign on behalf of submitter) Notes to person making submission: If you are making a submission to the Environmental Protection Authority, you should use Form 16B. Please note that your address is required to be made publicly available under the Resource Management Act 1991, as any further submission supporting or opposing this submission is required to be forwarded to you as well as the Council. If you are a person who could gain an advantage in trade competition through the submission, your right to make a submission may be limited by clause 6(4) of Part 1 of Schedule 1 of the Resource Management Act 1991. I could / could not gain an advantage in trade competition through this submission. If you could gain an advantage in trade competition through this submission please complete the I am __ / am not __ directly affected by an effect of the subject matter of the submission that: (a) adversely affects the environment; and (b) does not relate to trade competition or the effects of trade competition.

Sent: Wednesday, 1 July 2020 8:32 AM **To:** Unitary Plan <unitaryplan@aklc.govt.nz>

Subject: RE: Submissions on private plan change request #42

Morning Bronnie,

Can we please submit these as is.

Thank you

Cassandra

From: Unitary Plan < unitaryplan@aklc.govt.nz >

Sent: Tuesday, 30 June 2020 4:30 p.m.

To: Cassandra Kingi-Waru < Cassandra.Kingi-Waru@tehaoranga.co.nz >

Cc: Unitary Plan <unitaryplan@aklc.govt.nz>

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Thank you for forwarding the submissions onto Auckland Council

I note that the submission states "See attached information" but there is no information attached the submissions.

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Regards

Bronnie

Bronnie Styles - Planning Technician Auckland-wide | Plans and Places Auckland Council Ph 09 3010101 | DDI 09 890 2718 | 021 801 640 Level 24, 135 Albert Street, Auckland

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Attached are Submissions on private plan change request #42.

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Attn: Planning Technician		Submission No:
Auckland Council		Receipt Date:
Level 24, 135 Albert Street		
Private Bag 92300 Auckland 1142		
Auckland 1142		
Submitter details		
	. 11.3	
Full Name or Name of Agent (if applic	cable)	
Mr/Mcs/Miss/Ms(Full MoAn	JA BEAZLEY	
Organisation Name (if submission is	made on behalf of Organisation)	×
Address for service of Submitter	- 1	
RD3 MCPIKE RD R	.D3 WAIMAUKU 088	3
- · · · · · · · · · · · · · · · · · · ·		
Telephone: 0274313435		
Contact Person: (Name and designation	n, if applicable)	
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		an existing plan.
Plan Change/Variation Number	PC 42	
Plan Change/Variation Name	Auckland Regional Landfill Wayby Va	allev
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The specific provisions that my subn	nission relates to are:	
(Please identify the specific parts of the		
Plan provision(s) Landfill Prec	inct	
Or		
Property Address 1232 State H	ighway 1, Wayby Valley	
Or		
Мар		
Or		
Other (specify)		
Submission		
My submission is: (Please indicate water amended and the reasons for your views		cific provisions or wish to have them
support the specific provisions identif	ied above 🗌	
I oppose the specific provisions identified above ✓		
I wish to have the provisions identified above amended Yes No		

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I seek the following decision by Council:

Accept the proposed plan change / variation with amendments as outlined below

Decline the proposed plan change / variation is not declined, then amend it as outlined below.

I wish to be heard in support of my submission

If others make a similar submission, I will consider presenting a joint case with them at a hearing

does not relate to trade competition or the effects of trade competition.

(b)

Signature of Submitter 28/6/26 Date
(or person authorised to sign on behalf of submitter)
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If you <u>could</u> gain an advantage in trade competition through this submission please complete the following:
I am \square / am not \square directly affected by an effect of the subject matter of the submission that:
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Level 24, 135 Albert Street		'
Private Bag 92300 Auckland 1142		
Submitter details		
Full Name or Name of Agent (if appli	cable)	
Mrs/Mrs/Miss/Ms(Full Name)	gela Pauline	Pekauti.
Organisation Name (if submission is	s made on behalf of Organisation)	
Address for service of Submitter	٩	
99B Ratawhiv	i Rd. Helessulle	0300
Telephone: ©2188983		- 1000 - 1101
1	post R.	Track 99 Damailion
Contact Person: (Name and designatio	n, if applicable)	
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Or Property Address 1232 State H	ighway 1 Wayby Valley	
Or	ighway 1, Wayby Valley	
Map		
Or		
Other (specify)		
Submission		
My submission is: (Please indicate water amended and the reasons for your views	hether you support or oppose the spec s)	ific provisions or wish to have them
I support the specific provisions identif	ied above 🗌	
I oppose the specific provisions identifi	ed above 🗹	
I wish to have the provisions identified a	above amended Yes \(\square\) No \(\square\)	

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Decline the proposed plan change / variation	☑ 253.1
If the proposed plan change / variation is not declined, then amend it as outlined below.	
I wish to be heard in support of my submission	✓
I do not wish to be heard in support of my submission	
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Level 24, 135 Albert Street		Receipt Date:
Private Bag 92300		
Auckland 1142		
Submitter details		
Full Name or Name of Agent (if applic	abla)	
	able)	
Mr/Mrs/Miss/Ms(Full Name)		
	IE KING NODA	
Organisation Name (if submission is	made on behalf of Organisation)	
Address for service of Submitter		
	25.45	
220 CENTREWAY	ROAD OREWA	0931
Telephone: 09 11 20 115	Fax/Email:	
0142540		
Contact Person: (Name and designation	, іт арріісаріе)	
Scope of submission		
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The specific provisions that my submer (Please identify the specific parts of the		
Plan provision(s) Landfill Preci	nct	
Or Property Address 1232 State Hi	1 4 144 1 17 11	
TEGE Glate III	ghway 1, Wayby Valley	
Or		
Мар		
Or Other (energify)		
Other (specify)		
Submission		
My submission is: (Please indicate w	hether you support or oppose the spe	cific provisions or wish to have them
amended and the reasons for your views		
I support the specific provisions identifi	ed above	
i aupport the apecinic provisions identifi	CG 90046 []	
l oppose the specific provisions identified above 🗹		
I wish to have the provisions identified above amended Yes No		
i wish to have the provisions identified a	bove amended Yes _ No _	J

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Level 24, 135 Albert Street	Neceipi Date.
Private Bag 92300	
Auckland 1142	
Submitter details	
Full Name or Name of Agent (if applicable)	
Mr/Mrs/Miss(Ms)(Full	4
Name) Judith mary Stand	Ling
Organisation Name (if submission is made on behalf of Organisation)	J
Address for service of Submitter	
220 Centreway Road Orewa	093/
1	
Telephone: 021394997 Fax/Email: 1es N	ude equalicon
Contact Person: (Name and designation, if applicable)	9
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	Valley
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Auckland 1142			
Submitter details			
Full Name or Name of Agent (if applic	able)		
Name)	1-ATPETI		
Organisation Name (if submission is	made on behalf of Organisation)		
Address for service of Submitter	2 1		
2291 KAIPARA CEI	787 HUAY, PA4 "	WHEREN OR 171 USAS C	
Tolonhono	Fax/Email: 1 tailed	16 3	
Telephone: 02745436	() /	1@ ani con	
Contact Person: (Name and designation	, if applicable)	\bigcirc	
Scope of submission			
This is a submission on the following	proposed plan change / variation to	an existing plan:	
Plan Change/Variation Number	PC 42		
Plan Change/Variation Name Auckland Regional Landfill Wayby Valley			
The specific provisions that my subm	nission relates to are:		
(Please identify the specific parts of the			
Plan provision(s) Landfill Preci	nct		
Or			
Property Address 1232 State Hi	ghway 1, Wayby Valley	5	
Or			
Мар			
Or			
Other (specify)			
Submission			
My submission is: (Please indicate w amended and the reasons for your views,		cific provisions or wish to have them	
I support the specific provisions identifi	ed above 🗌		
I oppose the specific provisions identifie	ed above		
I wish to have the provisions identified a	I wish to have the provisions identified above amended Yes No		

The proposal is conflicts with sound resource management The reasons for my views are:

The proposal is conflicts with sound resource management principles; the purpose and principles of the Resource Management Act 1991, the Auckland Unitary Plan, National Policy Statements on Freshwater Management; Waste Minimisation Act 2008 and the Auckland Council Waste Management and Minimisation Plan. I object to one off bespoke objectives, policies and rules being applied to this site. See attached information. I seek the following decision by Council: Accept the proposed plan change / variation Accept the proposed plan change / variation with amendments as outlined below Decline the proposed plan change / variation 257.1 If the proposed plan change / variation is not declined, then amend it as outlined below. I wish to be heard in support of my submission I do not wish to be heard in support of my submission If others make a similar submission, I will consider presenting a joint case with them at a hearing (or person authorised to sign on behalf of submitter) Notes to person making submission: If you are making a submission to the Environmental Protection Authority, you should use Form 16B. Please note that your address is required to be made publicly available under the Resource Management Act 1991, as any further submission supporting or opposing this submission is required to be forwarded to you as well as the Council. If you are a person who could gain an advantage in trade competition through the submission, your right to make a submission may be limited by clause 6(4) of Part 1 of Schedule 1 of the Resource Management Act 1991. I could // could not // gain an advantage in trade competition through this submission. If you could gain an advantage in trade competition through this submission please complete the following: I am \square / am not \square directly affected by an effect of the subject matter of the submission that: adversely affects the environment; and (a) (b) does not relate to trade competition or the effects of trade competition.

Sent: Wednesday, 1 July 2020 8:32 AM **To:** Unitary Plan <unitaryplan@aklc.govt.nz>

Subject: RE: Submissions on private plan change request #42

Morning Bronnie,

Can we please submit these as is.

Thank you

Cassandra

From: Unitary Plan < unitaryplan@aklc.govt.nz >

Sent: Tuesday, 30 June 2020 4:30 p.m.

To: Cassandra Kingi-Waru < Cassandra.Kingi-Waru@tehaoranga.co.nz >

Cc: Unitary Plan <unitaryplan@aklc.govt.nz>

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Sent: Friday, 19 June 2020 3:15 PM

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To Whom It May Concern,

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Submission on a notified proposal for policy statement or plan change or variation

Clause 6 of Schedule 1, Resource Management Act 1991 FORM 5



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		Submission No:
Attn: Planning Technician Auckland Council		Receipt Date:
Level 24, 135 Albert Street		The sector Batter
Private Bag 92300		
Auckland 1142		
Submitter details		
Full Name or Name of Agent (if applications)	able)	
Mr/Mrs/Miss/Ms(Full		2
Name)	CaA-1 DE	BOTA
Organisation Name (if submission is	made on behalf of Organisation)	
Address for service of Submitter		
Telephone: 021 09 0 59	7.4 Fax/Email:	
Contact Person: (Name and designation	017	
Contact Ferson. (Name and designation	, it applicable)	
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Or		
Property Address 1232 State Hi	ghway 1, Wayby Valley	18
Or Man		
Map		
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0.1.		
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Auckland 1142				
Submitter details				
Full Name or Name of Agent (if appl	icable)			
Mr:/Mrs:/Miss/Ms(Full Name)	da Gail Wichman			
Organisation Name (if submission	s made on behalf of Organisation)			
Address for service of Submitter	5 Parin St			
	telensy the of	300		
Telephone:	Fax/Email: Wich:	mancichotmail-com		
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Property Address 1232 State H	lighway 1, Wayby Valley	9		
Or				
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Or Other (specify)				
(
Submission				
My submission is: (Please indicate whether you support or oppose the specific provisions or wish to have them amended and the reasons for your views)				
I support the specific provisions identified above				
I oppose the specific provisions identified above ✓				
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Subject: RE: Submissions on private plan change request #42

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If you are making a submission to the Environmental Protection Authority, you should use Form 1	108.	
Please note that your address is required to be made publicly available under the Resource Man		
1991, as any further submission supporting or opposing this submission is required to be forward as the Council.	led to you as well	
If you are a person who could gain an advantage in trade competition through the submission, yo	our right to make a	
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I am I am not I directly affected by an effect of the subject matter of the submission the	nat:	
(a) adversely affects the environment; and		
(b) does not relate to trade competition or the effects of trade competition.		

Sent: Wednesday, 1 July 2020 8:32 AM **To:** Unitary Plan <unitaryplan@aklc.govt.nz>

Subject: RE: Submissions on private plan change request #42

Morning Bronnie,

Can we please submit these as is.

Thank you

Cassandra

From: Unitary Plan < unitaryplan@aklc.govt.nz >

Sent: Tuesday, 30 June 2020 4:30 p.m.

To: Cassandra Kingi-Waru < Cassandra.Kingi-Waru@tehaoranga.co.nz >

Cc: Unitary Plan <unitaryplan@aklc.govt.nz>

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Regards

Bronnie

Bronnie Styles - Planning Technician Auckland-wide | Plans and Places Auckland Council Ph 09 3010101 | DDI 09 890 2718 | 021 801 640 Level 24, 135 Albert Street, Auckland

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Sent: Friday, 19 June 2020 3:15 PM

To: Unitary Plan < unitaryplan@aklc.govt.nz >

Subject: Submissions on private plan change request #42

To Whom It May Concern,

Attached are Submissions on private plan change request #42.

Kind Regards,

Submission on a notified proposal for policy statement or plan change or variation Clause 6 of Schedule 1, Resource Management Act 1991 FORM 5



Send your submission to unitaryplan@au	ucklandcouncil.govt.nz or post to:	For office use only		
Attn: Dianning Technician		Submission No:		
Attn: Planning Technician Auckland Council		Receipt Date:		
Level 24, 135 Albert Street		Receipt Date.		
Private Bag 92300				
Auckland 1142				
Submitter details				
Full Name or Name of Agent (if applications	able)			
Mr/Mrs/Miss/Ms(Full	entin Tover			
Name) (Que				
Organisation Name (if submission is	made on behalf of Organisation)			
A Library Commission of Outliering				
Address for service of Submitter	- 0.1			
49 Warmola	3 gien			
SWanso	h/'			
Telephone:	Fax/Email:			
Contact Person: (Name and designation	if applicable)			
3	, , , ,			
Scope of submission				
This is a submission on the following	proposed plan change / variation to	an existing plan:		
Plan Change/Variation Number	PC 42			
Plan Change/Variation Name	Auckland Regional Landfill Wayby Valley			
The specific provisions that my subm (Please identify the specific parts of the				
Plan provision(s) Landfill Preci	nct			
Or Property Address 1232 State High				
1202 State In	ghway 1, Wayby Valley			
Or Map				
Or				
Other (specify)				
Submission				
My submission is: (Please indicate whether you support or oppose the specific provisions or wish to have them amended and the reasons for your views)				
l support the specific provisions identified above				
l oppose the specific provisions identified above √				
I wish to have the provisions identified al	pove amended Yes No			
15 provisiona addita distributa				

Auckland Unitary Plan, National Policy Statements on Freshwater Management: Waste Minimisation Act 2008 and the Auckland Council Waste Management and Minimisation Plan. I object to one off bespoke objectives, policies and rules being applied to this site. See attached information. I seek the following decision by Council: Accept the proposed plan change / variation Accept the proposed plan change / variation with amendments as outlined below 272.1 Ý Decline the proposed plan change / variation If the proposed plan change / variation is not declined, then amend it as outlined below. $\sqrt{}$ I wish to be heard in support of my submission I do not wish to be heard in support of my submission If others make a similar submission, I will consider presenting a joint case with them at a hearing Signature of Submitter (or person authorised to sign on behalf of submitter) Notes to person making submission: If you are making a submission to the Environmental Protection Authority, you should use Form 16B. Please note that your address is required to be made publicly available under the Resource Management Act 1991, as any further submission supporting or opposing this submission is required to be forwarded to you as well as the Council. If you are a person who could gain an advantage in trade competition through the submission, your right to make a submission may be limited by clause 6(4) of Part 1 of Schedule 1 of the Resource Management Act 1991. I could / could not gain an advantage in trade competition through this submission. If you could gain an advantage in trade competition through this submission please complete the following: I am \square / am not \square directly affected by an effect of the subject matter of the submission that: adversely affects the environment; and (a) (b) does not relate to trade competition or the effects of trade competition.

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Attn: Planning Technician		Submission No:
Auckland Council		Receipt Date:
Level 24, 135 Albert Street		'
Private Bag 92300 Auckland 1142		
Addition 1112		
Submitter details		
Full Name or Name of Agent (if applic	cable)	
Mr/Mrs/Miss/Ms(Full	0 == 11.	II DETAIL MORTH
Name)	KONGODAL OIE-FIA	19HI-RATANA_MOREHU
Organisation Name (if submission is	made on behalf of Organisation)	
Address for a miles of Calemina		
Address for service of Submitter		
10 NGA OHO, OR	AKEI 10 11	
Telephone: 021-213-1	S8/L Fax/Email: te some	paintagrant COM
Contact Person: (Name and designation		Jan Com
Contact Forcom. (Name and designation	i, ii applicable)	
Scope of submission		
This is a submission on the following	proposed plan change / variation t	o an existing plan:
Plan Change/Variation Number	PC 42	
Plan Change/Variation Name	Auckland Regional Landfill Wayby V	'alley
The specific provisions that my subm (Please identify the specific parts of the		
Plan provision(s) Landfill Prec	inct	
Or		
Property Address 1232 State H	ighway 1, Wayby Valley	
Or		
Мар		
Or Other (amority)		
Other (s pecify)		
Submission		
My submission is: (Please indicate was amended and the reasons for your views		ecific provisions or wish to have them
I support the specific provisions identif	ied above 🗌	
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I wish to have the provisions identified a	above amended Yes \(\square\) No [

Accept the proposed plan change / variation with amendments as outlined below Decline the proposed plan change / variation If the proposed plan change / variation is not declined, then amend it as outlined below.	The proposal is conflicts with sound resound reasons for my views are: orlinciples; the purpose and principles of the Resource Management of the Resource Management of Unitary Plan, National Policy Statements on Freshwater Note Missing Statement Council Waste Management of the Resource of The Statement of The	ent Act 1991, the Management,
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		that:
(b) does not relate to trade competition or the effects of trade competition.		
	(b) does not relate to trade competition or the effects of trade competition.	

Sent: Wednesday, 1 July 2020 8:32 AM **To:** Unitary Plan <unitaryplan@aklc.govt.nz>

Subject: RE: Submissions on private plan change request #42

Morning Bronnie,

Can we please submit these as is.

Thank you

Cassandra

From: Unitary Plan < unitaryplan@aklc.govt.nz >

Sent: Tuesday, 30 June 2020 4:30 p.m.

To: Cassandra Kingi-Waru < Cassandra.Kingi-Waru@tehaoranga.co.nz >

Cc: Unitary Plan <unitaryplan@aklc.govt.nz>

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Regards

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Clause 6 of Schedule 1, Resource Management Act 1991 FORM 5



For office use only Send your submission to unitaryplan@aucklandcouncil.govt.nz or post to: Submission No: Attn: Planning Technician Auckland Council Receipt Date: Level 24, 135 Albert Street Private Bag 92300 Auckland 1142 Submitter details Full Name or Name of Agent (if applicable) Mr/Mrs/Miss/Ms(Full √(ame) Organisation Name (if submission is made on behalf of Organisation) Address for service of Submitter ZHROENS 021560445 Fax/Email: Telephone: Contact Person: (Name and designation, if applicable) Scope of submission This is a submission on the following proposed plan change / variation to an existing plan: Plan Change/Variation Number PC 42 Plan Change/Variation Name Auckland Regional Landfill Wayby Valley The specific provisions that my submission relates to are: (Please identify the specific parts of the proposed plan change / variation) Plan provision(s) **Landfill Precinct** Or Property Address 1232 State Highway 1, Wayby Valley Or Map Other (specify) Submission My submission is: (Please indicate whether you support or oppose the specific provisions or wish to have them amended and the reasons for your views) I **support** the specific provisions identified above I oppose the specific provisions identified above 4 No \square I wish to have the provisions identified above amended Yes \square

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I seek the following decision by Council:	
Accept the proposed plan change / variation	
Accept the proposed plan change / variation with amendments as outlined below	
Decline the proposed plan change / variation	☑ 277.1
If the proposed plan change / variation is not declined, then amend it as outlined below.	
I wish to be heard in support of my submission	V
I do not wish to be heard in support of my submission	
9. Samson 30/6/2020	
Signature of Submitter (or person authorised to sign on behalf of submitter)	
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Submission on a notified proposal for policy statement or plan change or variation Clause 6 of Schedule 1, Resource Management Act 1991 FORM 5



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Attn: Planning Technician		Submission No:
Auckland Council		Receipt Date:
Level 24, 135 Albert Street Private Bag 92300		
Auckland 1142		
Submitter details		
Full Name or Name of Agent (if ag	pplicable)	
Mr/Mrs/Miss/Ms(Full Name)	1 LENDIAH MERCIA	SAMSON
Organisation Name (if submission	n is made on behalf of Organisation)	
Address for service of Submitter		
33 CHIC YARD	ENS, PARAKAI	
Telephone: 022/6797	7/ Fax/Email: 9:50ms	on@Lotarilicoins
Contact Person: (Name and design		
Scope of submission		
This is a submission on the follow	wing proposed plan change / variation to	an existing plan:
Plan Change/Variation Num	ber PC 42	
Plan Change/Variation Nam	e Auckland Regional Landfill Wayby V	alley
Tian change, variation Nam	Additional Regional Editami Waysy V	uncy
The specific provisions that my s (Please identify the specific parts of	ubmission relates to are: the proposed plan change / variation)	
Plan provision(s) Landfill Pr	recinct	
Or		
Property Address 1232 State	Highway 1, Wayby Valley	
Or Mari		
Map		
Or Other (specify)		
Submission		
,,	te whether you support or oppose the spe iews)	cific provisions or wish to have them
I support the specific provisions ide	entified above	
I oppose the specific provisions ide	ntified above 🗹	
I wish to have the provisions identifi	ed above amended Yes \(\simeq \text{No } \simeq]

Auckland Unitary Plan, National Policy Statements on Freshwater Management; Waste Minimisation Act 2008 and the Auckland Council Waste Management and Minimisation Plan. I object to one off bespoke objectives, policies and rules being applied to this site. See attached information. I seek the following decision by Council: Accept the proposed plan change / variation Accept the proposed plan change / variation with amendments as outlined below 278.1 \checkmark Decline the proposed plan change / variation If the proposed plan change / variation is not declined, then amend it as outlined below. \checkmark I wish to be heard in support of my submission I do not wish to be heard in support of my submission If others make a similar submission, I will consider presenting a joint case with them at a hearing Signature of Submit (or person authorised to sign on behalf of submitter) Notes to person making submission: If you are making a submission to the Environmental Protection Authority, you should use Form 16B. Please note that your address is required to be made publicly available under the Resource Management Act 1991, as any further submission supporting or opposing this submission is required to be forwarded to you as well as the Council. If you are a person who could gain an advantage in trade competition through the submission, your right to make a submission may be limited by clause 6(4) of Part 1 of Schedule 1 of the Resource Management Act 1991. I could // could not // gain an advantage in trade competition through this submission. If you could gain an advantage in trade competition through this submission please complete the following: I am __ / am not __ directly affected by an effect of the subject matter of the submission that: adversely affects the environment; and (a) (b) does not relate to trade competition or the effects of trade competition.

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Attas Diamaia a Tach = i = i = :		Submission No:
Attn: Planning Technician Auckland Council		Receipt Date:
Level 24, 135 Albert Street		Neceipi Date.
Private Bag 92300		
Auckland 1142		
Submitter details		
Full Name or Name of Agent (if applic	able)	
Mr/Mrs/Miss/Ms(Full Name)	c Samson	
Organisation Name (if submission is	made on behalf of Organisation)	
Address for convince of Submitter	,	
Address for service of Submitter	Helensville	
XU MINICIPE DI	170/0/1)	
Telephone: October 70	Fax/Email:	
Contact Person: (Name and designation		
	,	
Scope of submission		
This is a submission on the following	proposed plan change / variation t	o an existing plan:
Plan Change/Variation Number	PC 42	
<u> </u>		pupingana-neurosens-protesteren.
Plan Change/Variation Name	Auckland Regional Landfill Wayby V	/alley
The specific provisions that my subm		
(Please identify the specific parts of the	proposed plan change / variation)	
Plan provision(s) Landfill Preci	nct	
Or		
Property Address 1232 State Hi	ghway 1, Wayby Valley	
Property Address Or 1232 State Hi	ghway 1, Wayby Valley	
1202 01010 111	ghway 1, Wayby Valley	
Or Map Or	ghway 1, Wayby Valley	
Or Map	ghway 1, Wayby Valley	
Or Map Or	ghway 1, Wayby Valley	
Or Map Or	ghway 1, Wayby Valley	
Or Map Or Other (specify)	hether you support or oppose the spe	ecific provisions or wish to have them
Or Map Or Other (specify) Submission My submission is: (Please indicate where the submission is)	hether you support or oppose the spe	ecific provisions or wish to have them
Or Map Or Other (specify) Submission My submission is: (Please indicate what amended and the reasons for your views)	hether you support or oppose the spe	ecific provisions or wish to have them
Or Map Or Other (specify) Submission My submission is: (Please indicate what amended and the reasons for your views) I support the specific provisions identified	hether you support or oppose the specied above ded above	

The reasons for my views are: principles of the Resource Manager	nent Act 1991, the
Auckland Unitary Plan, National Policy Statements on Freshwate	er Management;
Waste Minimisation Act 2008 and the Auckland Council Waste M	
Minimisation Plan. I object to one off bespoke objectives, policie	
applied to this site. See attached information.	separate sh ee t if necessar y)
I seek the following decision by Council:	
Accept the proposed plan change / variation	
Accept the proposed plan change / variation with amendments as outlined below	
Decline the proposed plan change / variation	☑ 279.1
If the proposed plan change / variation is not declined, then amend it as outlined below.	
I wish to be heard in support of my submission	✓
I do not wish to be heard in support of my submission	
I do not wish to be heard in support of my submission If others make a similar submission, I will consider presenting a joint case with them at a hear	ring 🗌
· · · · · · · · · · · · · · · · · · ·	ring
If others make a similar submission, I will consider presenting a joint case with them at a hear signature of Submitter Signature of Submitter (or person authorised to sign on behalf of submitter)	ring
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•
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I seek the following decision by Council:
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Accept the proposed plan change / variation
Accept the proposed plan change / variation with amendments as outlined below
Decline the proposed plan change / variation 280.1
If the proposed plan change / variation is not declined, then amend it as outlined below.
Birds to live a Feed in the Forest.
Education for children to Explore the endiques forest.
Food for Birds & Insicts.
I wish to be heard in support of my submission
I do not wish to be heard in support of my submission
If others make a similar submission, I will consider presenting a joint case with them at a hearing
Shirley Levelsby.
01-07-2020
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Sent: Tuesday, 30 June 2020 4:30 p.m.

To: Cassandra Kingi-Waru < Cassandra.Kingi-Waru@tehaoranga.co.nz >

Cc: Unitary Plan <unitaryplan@aklc.govt.nz>

Subject: FW: Submissions on private plan change request #42

Good afternoon Cassandra

Thank you for forwarding the submissions onto Auckland Council

I note that the submission states "See attached information" but there is no information attached the submissions.

Can you please advise.

Regards

Bronnie

Bronnie Styles - Planning Technician Auckland-wide | Plans and Places Auckland Council Ph 09 3010101 | DDI 09 890 2718 | 021 801 640 Level 24, 135 Albert Street, Auckland

Visit our website : www.aucklandcouncil.govt.nz

From: Cassandra Kingi-Waru < Cassandra.Kingi-Waru@tehaoranga.co.nz >

Sent: Friday, 19 June 2020 3:15 PM

To: Unitary Plan < unitaryplan@aklc.govt.nz >

Subject: Submissions on private plan change request #42

To Whom It May Concern,

Attached are Submissions on private plan change request #42.

Kind Regards,

Clause 6 of Schedule 1, Resource Management Act 1991 FORM 5



For office use only Send your submission to unitaryplan@aucklandcouncil.govt.nz or post to Submission No: Attn: Planning Technician Auckland Council Receipt Date: Level 24, 135 Albert Street Private Bag 92300 Auckland 1142 Submitter details Full Name or Name of Agent (if applicable) Mr/Mrs/Miss/Ms (Full HOROWAI HEREORA Name) Organisation Name (if submission is made on behalf of Organisation) Address for service of Submitter 372934 Fax/Email: Contact Person: (Name and designation, if applicable) Scope of submission This is a submission on the following proposed plan change / variation to an existing plan: Plan Change/Variation Number PC 42 Plan Change/Variation Name Auckland Regional Landfill Wayby Valley The specific provisions that my submission relates to are: (Please identify the specific parts of the proposed plan change / variation) Plan provision(s) Landfill Precinct Or Property Address 1232 State Highway 1, Wayby Valley Or Map Ωr Other (specify) Submission My submission is: (Please indicate whether you support or oppose the specific provisions or wish to have them amended and the reasons for your views) I **support** the specific provisions identified above \Box I oppose the specific provisions identified above I wish to have the provisions identified above amended Yes 🗌 No 🗌

Accept the proposed plan change / variation		
Accept the proposed plan change / variation with amendments as outlined below		
Decline the proposed plan change / variation	\checkmark	282.1
If the proposed plan change / variation is not declined, then amend it as outlined below.		
I wish to be heard in support of my submission	I	
I do not wish to be heard in support of my submission		
If others make a similar submission, I will consider presenting a joint case with them at a hearing		
Signature of Submitter (or person authorised to sign on behalf of submitter) 30.6.2026 Date		_
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I am ☐ / am not ☐ directly affected by an effect of the subject matter of the submission tha	it:	

(a)

(b)

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V

30/6/2020

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For office use only Send your submission to unitaryplan@aucklandcouncil.govt.nz or post to: Submission No: Attn: Planning Technician Auckland Council Receipt Date: Level 24, 135 Albert Street Private Bag 92300 Auckland 1142 Submitter details Full Name or Name of Agent (if applicable) Wirs/Wiss/Ms(Full Name) Organisation Name (if submission is made on behalf of Organisation) Address for service of Submitter Fax/Email: Contact Person: (Name and designation, if applicable) Scope of submission This is a submission on the following proposed plan change / variation to an existing plan: Plan Change/Variation Number PC 42 Plan Change/Variation Name Auckland Regional Landfill Wayby Valley The specific provisions that my submission relates to are: (Please identify the specific parts of the proposed plan change / variation) Plan provision(s) **Landfill Precinct** Property Address 1232 State Highway 1, Wayby Valley OrMap Ωr Other (specify) Submission My submission is: (Please indicate whether you support or oppose the specific provisions or wish to have them amended and the reasons for your views) I support the specific provisions identified above I oppose the specific provisions identified above 🗸 I wish to have the provisions identified above amended Yes 🗌 No \square

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Sent: Wednesday, 1 July 2020 8:32 AM **To:** Unitary Plan <unitaryplan@aklc.govt.nz>

Subject: RE: Submissions on private plan change request #42

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From: Unitary Plan < unitaryplan@aklc.govt.nz >

Sent: Tuesday, 30 June 2020 4:30 p.m.

To: Cassandra Kingi-Waru < Cassandra.Kingi-Waru@tehaoranga.co.nz >

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_Mr/Mrs/Miss/Ms(Full 🛴		#?
Name)	ni Jana KINIKI	V }
Organisation Name (if submission is	s made on behalf of Organisation)	
Address for service of Submitter	ad RDS Laukapak	apa 08%
		71 - 72
Telephone: OAL 7035	Fax/Email:	
Contact Person: (Name and designation		
Contact 1 crson. (Name and designatio	i, ii applicable)	
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Plan provision(s) Landfill Pred	inct	
Or		
Property Address 1232 State H	ighway 1, Wayby Valley	
Or Man		
Map		
Or Other (specify)		
Submission		
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Subject: RE: Submissions on private plan change request #42

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Sent: Tuesday, 30 June 2020 4:30 p.m.

To: Cassandra Kingi-Waru < Cassandra.Kingi-Waru@tehaoranga.co.nz >

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Submission on a notified proposal for policy statement or plan change or variation Clause 6 of Schedule 1, Resource Management Act 1991 FORM 5



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Attn: Planning Technician		Submission No:
Auckland Council		Receipt Date:
Level 24, 135 Albert Street		· ·
Private Bag 92300 Auckland 1142		
Submitter details		
Full Name or Name of Agent (if appli	cable)	
Mr/Mrs/Miss/Ms(Full Name)	ZOHANUI HATLEY	
Organisation Name (Fsubmission is	s made on behalf of Organisation)	
Address for service of Submitter	2/9 S'DRINGS RO	
	PARAKAI	
Telephone: \$2/0290023	2, Fax/Email: Los when	10116
Contact Person: (Name and designation		
Scope of submission		
This is a submission on the followin	g proposed plan change / variation to	an existing plan:
Plan Change/Variation Number		
· ·		
Plan Change/Variation Name	Auckland Regional Landfill Wayby Va	alley
The specific provisions that my sub-		
Plan provision(s) Landfill Pred	cinct	
Or		
Property Address 1232 State H	lighway 1, Wayby Valley	
Or Man		
Map		
Or Other (specify)		
Submission		
My submission is: (Please indicate value) amended and the reasons for your view	whether you support or oppose the spe s)	cific provisions or wish to have them
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