

Application for extension of a lapsing period for a resource consent



Property, Consents and Licensing

Under section 125 of the Resource Management Act 1991

Please send or deliver your application to the Council

Office use only:

Application No: _____

Receipt Date: _____

Deposit Paid: _____

It is important to complete this form and provide all necessary information as required in order to avoid delays in processing the application.

Accept/Reject **1.0 GENERAL DETAILS**

This application is for an extension of time to the following Resource Consent:

Ref No: which lapses on

Site to which the application relates is described as:

No: Street: Suburb:

Legal Description:

2.0 APPLICANT DETAILS

Name: *(please write all names in full)*

Physical Address: Postcode:

Postal Address: *(if different)* Postcode:

Telephone (day): Mobile: Fax:

Email: Please tick if email preferred method

The applicant is the
 Owner Occupier Lessee Prospective Purchaser The Crown Network Utility Operator Other
of the site to which the application relates.

3.0 AGENT/CONSULTANT DETAILS (If different from above)

Company: Contact Person:

Postal Address of agent: Postcode:

Telephone (day): Mobile: Fax:

Email: Please tick if email preferred method

P0257.7 08/07/10

4.0 ADDRESS FOR CORRESPONDENCE AND INVOICES

All correspondence (excluding invoices) sent to:

<input type="checkbox"/> Applicant	<input type="checkbox"/> Agent/Consultant	<input type="checkbox"/> Other: _____
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Invoices sent to:

<input type="checkbox"/> Applicant	<input type="checkbox"/> Agent/Consultant	<input type="checkbox"/> Other: _____
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5.0 DISTRICT AND REGIONAL PLANS

Relevant District Plan

- | | | |
|---|--|---|
| <input type="checkbox"/> Auckland Central | <input type="checkbox"/> Auckland Gulf Islands | <input type="checkbox"/> Auckland Isthmus |
| <input type="checkbox"/> Franklin | <input type="checkbox"/> Manukau | <input type="checkbox"/> North Shore |
| <input type="checkbox"/> Papakura | <input type="checkbox"/> Rodney | <input type="checkbox"/> Waitakere |

Relevant Regional Plan

- | | | |
|--|---|--|
| <input type="checkbox"/> Coastal | <input type="checkbox"/> Sediment Control | <input type="checkbox"/> Proposed Air, Land, Water |
| <input type="checkbox"/> Farm Dairy Discharges | <input type="checkbox"/> Transitional Regional Plan | |

6.0 PRE APPLICATION INFORMATION

Have you received pre-application information or had a pre-application meeting regarding this proposal from the Council?

<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Copy of meeting minutes attached	Date of meeting: _____
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If YES, provide the reference number and/or name of staff members(s):

7.0 SITE VISIT REQUIREMENTS

7.1 As landowner, and with the consent of any occupiers or lessee's, I agree to council staff or authorised consultants visiting the site, which is the subject of this application, for the purpose of assessing this application.

OR

7.2 If applicant is not the landowner:

Landowner's full name:

Landowner's signature: Date signed:

Landowner's full name:

Person authorised to sign on behalf of Landowner: Date signed:

Authorising person's signature:

7.3 Is there a locked gate or security system restricting access by council staff? Yes No

7.4 Do you have a dog on the property? Yes No

7.5 Provide details of any entry restrictions that council staff should be aware of; e.g. health and safety, organic farm etc.

8.0 WRITTEN APPROVALS

Have you identified anyone who you consider is likely to be adversely affected by the extension of time?

 Yes No

In respect of anyone identified as being adversely affected, have written approvals been attached?

 Yes No Some**9.0 INFORMATION TO BE SUBMITTED WITH THE APPLICATION**

Attach the following information in support of your application. If inadequate information is supplied with your application, this will cause delays in processing the application. Two copies (including one unbound) of all information are required.

A completed, signed application form including authorisation for site inspection and signed and dated by persons responsible for payment of fees and charges.

A copy of the original resource consent decision, and approved plans.

A document detailing:

- The length of time extension sought.
- A time line of all areas of progress since the original consent was granted.
- The effect of the proposed time extension on the policies and objectives of the relevant District / Regional plan or proposed plan.
- Further explanation, if necessary, if some persons deemed to be adversely affected have not provided their written approval (as identified in the written approvals section).

Any supporting documents / evidence showing that substantial progress or effort has been, and continues to be, made towards giving effect to the consent.

This may include marketing, arranging finance, commissioning construction plans, site investigations. Also note any impediments to progress.

10.0 DEPOSIT FEES

The required deposit must be paid before any processing of the application will start.

I enclose a deposit fee of \$ for the processing of this application. I/we understand that Council may invoice me for the actual and reasonable costs incurred in the processing of this application.*

11.0 DECLARATION CONCERNING PAYMENT OF FEES

I/we understand that the Council may charge me/us for all costs actually and reasonably incurred in processing this application. Subject to my/our rights under sections 357B and 358 of the RMA to object to any costs, I/we undertake to pay all processing costs incurred by the Council. Without limiting the Council's legal rights, if any steps, including the use of debt collectors, are necessary to recover unpaid processing costs, I/we agree to pay all costs of recovering those processing costs. If this application is made on behalf of a trust (private or family), a society (incorporated or unincorporated) or a company, in signing this application I/we are binding the trust, society or company to pay all the above costs and guaranteeing to pay all the above costs in my/our personal capacity.

Full name:

Signature:

Date:

12.0 SIGNATURE OF APPLICANT

Full name:

Signature:

Date:

Full name:

Signature:

Date:

PRIVACY INFORMATION

The information you have provided on this form is required so that your application can be processed under the RMA, so that statistics can be collected by the Council. The information will be stored on a public register, and held by the Council. The details may also be made available to the public on the Council's website, www.aucklandcouncil.govt.nz. These details are collected to inform the general public and community groups about all consents which have been issued through the Council. If you would like to request access to, or correction of your details, please contact the Council.

* Refer to Fees and Charges Schedule