

## **Before you fill out the attached submission form, you should know:**

You need to include your full name, an email address, or an alternative postal address for your submission to be valid. Also provide a contact phone number so we can contact you for hearing schedules (where requested).

By taking part in this public submission process your submission will be made public. The information requested on this form is required by the Resource Management Act 1991 as any further submission supporting or opposing this submission is required to be forwarded to you as well as Auckland Council. Your name, address, telephone number, email address, signature (if applicable) and the content of your submission will be made publicly available in Auckland Council documents and on our website.

Please note that your submission (or part of your submission) may be struck out if the authority is satisfied that at least one of the following applies to the submission (or part of the submission):

- It is frivolous or vexatious.
- It discloses no reasonable or relevant case.
- It would be an abuse of the hearing process to allow the submission (or the part) to be taken further.
- It contains offensive language.
- It is supported only by material that purports to be independent expert evidence, but has been prepared by a person who is not independent or who does not have sufficient specialised knowledge or skill to give expert advice on the matter.

# 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@aucklandcouncil.govt.nz](mailto:unitaryplan@aucklandcouncil.govt.nz) or post to :

Attn: Planning Technician  
Auckland Council  
Level 16, 135 Albert Street  
Private Bag 92300  
Auckland 1142

For office use only

Submission No:

Receipt Date:

## Submitter details

**Full Name or Name of Agent (if applicable)**

Mr/Mrs/Miss/Ms(Full Name)

**Organisation Name (if submission is made on behalf of Organisation)**

**Address for service of Submitter**

Telephone:

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 120

Plan Change/Variation Name

Housing Intensification and Resilience

**The specific provisions that my submission relates to are:**

(Please identify the specific parts of the proposed plan change / variation)

Plan provision(s)

Or

Property Address

Or

Map

Or

**Other (specify)**

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