Notice of Transfer of a Resource Consent to Another Person



Property, Consents and Licensing Under section 134, 135, 136 & 137 of the Resource Management Act 1991 Please send or deliver your application to the Council				
	Office Use Only:			
	Consent No:			
	Receipt Date:			
	Deposit Paid:			
1.0 GENERAL DETAILS				
Transfer of Resource Consent Number:				
Site(s) to which this application relates is described as:				
No: Street:	Suburb:			
Date Transfer Effective:				
Legal Description: (or for coastal permits, the site adjacent)				
Please attach a copy of the Certificate of Title where applicable.				

TO BE COMPLETED BY EXISTING CONSENT HOLDER

2.0 EXISTING	2.0 EXISTING CONSENT HOLDER DETAILS					
Name: (please write a names in full)	u					
Physical Address:	Postcode:					
Postal Address: (if different)	Postcode:					
Phone (day):	Mobile: Fax:					
Email:	Please tick if email preferred method of contact.					
The consent holder is the						
Owner Occupier Lessee Prospective Purchaser The Crown Network Utility Other Operator						
of the site to which the application relates.						
3.0 AGENT/CO	DNSULTANT DETAILS (If different from above)					
Company:	Contact Person:					
Postal Address of Agent:	Postcode:					
Phone (day):	Mobile: Fax:					
Email:						
P0284.2 06/07/10						

TO BE COMPLETED BY EXISTING CONSENT HOLDER

4.0 ADDRESS FOR CORRES	PONDENCE				
All correspondence (excluding invoices) sent to:	Consent Holder	☐ Agent/Consultant	□ Other		
Invoices sent to:	Consent Holder Agent/Consultant Other				
5.0 EXISTING CONSENT H	OLDER DECLARLA	TION			
The consent holder declares that to the best of their knowledge the resource consent is in full compliance with all terms and conditions of the resource consent and as such, the consent holder's interest in the consent is hereby transferred, subject to the provisions of the Resource Management Act and any relevant consent conditions.					
Signature:		Date:			
6.0 NEW CONSENT HOLD	ER DETAILS				
Name: (please write all names in full)					
Physical Address:	Postcode:				
Postal Address:	Postcode:				
Phone (day):	1	Mobile:	Fax:		
Email:					
The applicant is the:					
T_ T_	Lessee 🛛 Pros	pective Purchaser The C	rown 🛛 Network Utility 🗌 Other		
_		pective Purchaser 🛛 The C	Operator		
of the site to which the application r					
7.0 AGENT/CONSULTANT	DETAILS (If differe	nt from above)			
Company:		Contact Person:			
Postal Address of Agent:			Postcode:		
Phone (day):	Ма	obile:	Fax:		
Email:					
8.0 ADDRESS FOR CORRESPONDENCE					
All correspondence (excluding invoices) sent to:	Consent Holder	Agent/Consultant	Other		
Invoices sent to:	Consent Holder	Agent/Consultant	□ Other		

9.0 NEW CONSENT HOLDER DECLARATION

I/we the undersigned have reviewed the consent conditions and we acknowledge that the consent is to be transferred as described above, and undertake to comply with all conditions of the resource consent. I/we undertake that I/we will be liable for annual charges and other monitoring and supervision charges associated with the consent, effective from the date of transfer.

Signature:		Date:		
10.0 SIGNAT	TURE OF NEW CONSENT HOLDER (Transferee)			
Full name:		Signature:		
Date:				
Full name:		Signature:		
Date:				
PRIVACY INFORMATION				

The information you have provided on this form is required so that your request 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. 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.