

A130517



## Submission on resource consent application

Address all correspondence to: Chief Executive, Öpötiki District Council, PO Box 44, Öpötiki 3162 Ph 07 315 3030, Fax 07 315 7050 Or return to 108 St John Street, Opotiki Submitter details Full name of submitter(s) Address Postal address (if different) Phone (home) Phone (work) Mobile 602067 **Application details** Application RC 2024-31 number Tim Fergusson 19A Baird Road, Öpölilei Full name of applicant(s) Address of proposed activity Residential care facility Description of proposed activity Submission details My/our submission: ☐ Supports the application Opposes the application ☐ Neutral regarding the application The specific parts of the application to which my/our submission relates to are: The reasons for my/our submission are:

| o have amended and the general nature of any conditi   | ons sought):   | he parts of the application you wish  |
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| Submission at the hearing  |  |   |
| I/we wish to speak in support of my/our submission I/we do not wish to speak in support of my/our sub If others make a similar submission, I/we will consider  | mission.   | them at the hearing.  |
| Information for submitters  Opotiki District Council must receive this submission by   |  |   |
| of this submission to the applicant at the applicant of the applicant at t | he information provided on thi   | form to process your submission   |
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