2 1 AUG 2024



## Submission on resource consent application

A130517

| Ph 07 315 3030, Fax              | ōtiki District Council, PO Box 44, Ōpō                                | 5tiki 3162                |  |  |
|----------------------------------|---|---------------------------|--|--|
| Submitter details                |   |                           |  |  |
| Full name of submitter(s)        | Sode Rai Valar<br>48 Bairds Ro  | ie Collins.               |  |  |
| Address                          | 48 Bairds Ro  | ad, Opotik                | i e  |  |
| Postal address<br>(if different) |   |                           |  |  |
| Phone (home)                     | 0211065708  | Phone (work)              |  |  |
| Mobile                           |   | Email                     | jadecollins@hotmail.co.r   |  |
| Application details              | <b>S</b>  |                           |  |  |
| Application number               | RC2024-31   |                           |  |  |
| Full name of applicant(s)        | Timplergusa   |                           |  |  |
| Address of proposed activity     | 19a Bairds Rd Opotiki.  |                           |  |  |
| Description of proposed activity | RC2024-31 Tim Jerguson 19a Bairds Rd Opotiki. Residential Care polity |                           |  |  |
| Submission details               | 5   |                           |  |  |
|                                  | pplication  | Ibmission relates to are: |  |  |
| The reasons for my               | /our submission are:  | , 0                       | -tivi has the  |  |
| Much                             | needed in com   | munity. G                 | d providing a  |  |
| Sofe pl                          | ace to suppost  | those ado                 | potiki has the diproviding a dicted and there best The community |  |
| asaooh                           | ele.  |                           |  |  |

| The decision I/we would like Ōpōtiki District Council to make is (includir to have amended and the general nature of any conditions sought):  | ng, if relevant, the | e parts of the application you wish |  |  |  |
|---|----------------------|-------------------------------------|--|--|--|
|   |                      |                                     |  |  |  |
|   |                      |                                     |  |  |  |
|   |                      |                                     |  |  |  |
| Submission at the hearing   |                      |                                     |  |  |  |
| ☐ I/we wish to speak in support of my/our submission.   |                      |                                     |  |  |  |
| 1/we do not wish to speak in support of my/our submission.  |                      |                                     |  |  |  |
| ☐ If others make a similar submission, I/we will consider presenting a joint case with them at the hearing.   |                      |                                     |  |  |  |
| Information for submitters  |                      |                                     |  |  |  |
| Ōpōtiki District Council must receive this submission before the date and time indicated. You must also provide a copy of this submission to the applicant at the applicant's address for service as soon as reasonably practicable.  |                      |                                     |  |  |  |
| All submitters will be advised of hearing details at least 10 working days before the hearing. If you change your mind about attending the hearing, please phone Õpōtiki District Council so that the necessary arrangements can be made.   |                      |                                     |  |  |  |
| Privacy information: Õpōtiki District Council requires the information provided on this form to process your submission under the RMA and to collect statistics. The council will hold and store the information, including all associated reports and attachments, on a public register. 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 that have been processed or issued through the council. If you would like to request access to, or correction of any details, please contact the council. |                      |                                     |  |  |  |
| Declaration   |                      | 1.34                                |  |  |  |
| Submitter's signature   | Date                 | 02/08/24.                           |  |  |  |
| Submitter's signature   | Date                 |                                     |  |  |  |
| Submitter's signature   | Date                 |                                     |  |  |  |
| Declaration for the agent authorised to sign on behalf of the submitter   |                      |                                     |  |  |  |
| Agent's full name   |                      |                                     |  |  |  |
| Agent's signature   | Date                 |                                     |  |  |  |