

# Submission on resource consent application

A130517

**Address all correspondence to:**

Chief Executive, Opotiki District Council, PO Box 44, Opotiki 3162  
Ph 07 315 3030, Fax 07 315 7050  
Or return to 108 St John Street, Opotiki

**Submitter details**

Full name of submitter(s)	Kalim Herbert		
Address	76 Ford Street, Opotiki		
Postal address (if different)			
Phone (home)		Phone (work)	0274448699
Mobile	0273799951	Email	Kalim.herbert@whakatane.co.nz

**Application details**

Application number	RC2024-31
Full name of applicant(s)	Tim Fergusson
Address of proposed activity	19A Baird Road, Opotiki
Description of proposed activity	Residential care facility

**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 opening of the Rehab facility ~~for~~ in all its operations.*

**RECEIVED**  
21 AUG 2024  
Opotiki District Council  
RECORDS

The reasons for my/our submission are:

*To provide a great services for our whanau, Iwi and community, that are here in town, available for people who NEED help.*

The decision I/we would like Ōpōtiki District Council to make is (including, if relevant, the parts of the application you wish to have amended and the general nature of any conditions sought):

*Support the opening in All its procedures,  
to work in any support.*

#### 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 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 Ōpōtiki District Council so that the necessary arrangements can be made.

Privacy information: Ōpōtiki 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

Submitter's signature		Date	
Submitter's signature	<i>Kal O'Hara</i>	Date	<i>13/08/24</i>
Submitter's signature		Date	

#### Declaration for the agent authorised to sign on behalf of the submitter

Agent's full name			
Agent's signature		Date	