

## Submission on resource consent application

A130517

Ph 07 315 3030, Fax	ōtiki District Council, PO Box 44, Ōpōt	tiki 3162			
Submitter details					
Full name of submitter(s)	Maraea Huriwai				
Address	35c Hukutaia Road, Opotiki				
Postal address (if different)					
Phone (home)	Enterior to the little	Phone (work)	073156150		
Mobile	0279793772	Email	huriwai1@msn.com		
Application detail					
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 detail	THE STATE OF				
	pplication	omission relates to are:			
The reasons for my	/our submission are:				
To support the app	olication for the Residential facility.		2 1 AUG 2024 Opotiki District Council		

	Ōpōtiki District Council to make is (including neral nature of any conditions sought):	g, if relevant, th	e parts of the application you wish
Submission at the hearing		10	figure - Series Terry
	port of my/our submission. c in support of my/our submission. ubmission, I/we will consider presenting a jo	int case with th	em at the hearing.
Information for submitters			
	receive this submission before the date and licant at the applicant's address for service a		
	of hearing details at least 10 working days please phone Ōpōtiki District Council so tha		
under the RMA and to collec and attachments, on a public details are collected to inform	District Council requires the information pro t statistics. The council will hold and store the register. The details may also be made avai in the general public and community groups f you would like to request access to, or corr	ne information, lable to the pu about all cons	including all associated reports blic on the council's website. These ents that have been processed or
Declaration			
Submitter's signature	MJHuriwai	Date	13/08/2024
Submitter's signature		Date	7.0
Submitter's signature		Date	
Declaration for the agent a	uthorised to sign on behalf of the submit	tter	
Agent's full name			t Markey
Agent's signature		Date	
		1 (1)	