

Submission on resource consent application

A130517

Address all correspondence to: Chief Executive, Ōpōtiki District Council, PO Ph 07 315 3030, Fax 07 315 7050 Or return to 108 St John Street, Ōpōtiki	
Submitter details	Opotiki Dien
Full name of submitter(s) RutH MI	Potiki District Count
Address	
Postal address (if different) 103 HuKu	AIA RD
Phone (home)	Phone (work)
Mobile	Email
Application details	
Application number	
Full name of applicant(s)	
Address of proposed activity	
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 whi	nmy/our submission relates to are:
The reasons for my/our submission are:	

Ópôtiki District Council | PO Box 44 | 108 St John Street | Ópôtiki 3162 | New Zealand Telephone 07 315 3030 | Fax 07 315 7050 | www.odc.govt.nz | info@odc.govt.nz

	e Ōpōtiki District Council to make general nature of any conditions s		e parts of the application you wish
Submission at the hearing	g		
I/we wish to speak in su	upport of my/our submission.		
	eak in support of my/our submissi		
If others make a similar	submission, I/we will consider pr	esenting a joint case with th	nem at the hearing.
Information for submitte	rs		
	st receive this submission before pplicant at the applicant's address		
	ed of hearing details at least 10 w ng, please phone Ōpōtiki District 0		
under the RMA and to coll and attachments, on a pub details are collected to info	orm the general public and comm	l and store the information, be made available to the pu unity groups about all cons	
Declaration			
Submitter's signature	R. Harsh	Date	17/08/24
Submitter's signature		Date	
Submitter's signature		Date	
Declaration for the agent	t authorised to sign on behalf o	f the submitter	
Agent's full name			
Agent's signature		Date	