



## Submission on resource consent application

A130517

Ph 07 315 3030, Fax	otiki District Council, PO Box 44, 0	Ōpōtiki 3162			
Submitter details			Part of the second		
Full name of submitter(s)	Takapau Flavell				
Address	53 King Street				
Postal address (if different)					
Phone (home)		Phone (work)	027 302 6130		
Mobile		Email			
Application details					
Application number	RC2024-31				
Full name of applicant(s)	Tim Fergusson				
Address of proposed activity	19A Baird Road Ōpōtiki				
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:  Addictions in Whakatōhea					
is to be able to awh		one is there to make sure a	e and any other addicted substances we safe and good outcome for the person apapa and whenua.		

The decision I/we would like Ōpōtiki District Council to have amended and the general nature of any council To allow consent to open Kōpuārau so the team calleady in poverty this space allows them to heal a not the issue at hand but will learn how to adapt but	onditions sought): an do what is required for our iwi and plan for the future safely and	to thrive with less crime, we are
Submission at the hearing	- 1 May 2	
☐ I/we wish to speak in support of my/our submis ☐ I/we do not wish to speak in support of my/our ☑ If others make a similar submission, I/we will co	r submission.	th them at the hearing.
Information for submitters		
Ōpōtiki District Council must receive this submission of this submission to the applicant at the applicant		
All submitters will be advised of hearing details at about attending the hearing, please phone Ōpōtik		
Privacy information: Ōpōtiki District Council require under the RMA and to collect statistics. The council and attachments, on a public register. The details retails are collected to inform the general public a issued through the council. If you would like to reconstructions.	il will hold and store the informat may also be made available to the nd community groups about all o	ion, including all associated reports e public on the council's website. These consents that have been processed or
Declaration		
Submitter's signature Paul	Date	13/08/2024
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	
		8.