

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)	Waata Heathcote, Waiariki Whanau Mentoring		
Address	13 Canning Place, Whakatane		
Postal address (if different)	PO Box 537, Whakatane		
Phone (home)		Phone (work)	
Mobile	021 0255 6056	Email	waata@waiarikiwhanau.org.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:

As per the above with respect to Address and Description of proposed activity

The reasons for my/our submission are:

There is an abundant need for this project within the Opotiki District and wider. It's an issue of epidemic proportions and the need to support this is highly important and critical as it means people lives every moment that goes by.

As a provider that works with the most vulnerable, especially those on Methamphetamine, the district council has an important role to play in terms of its wellness of the community. As a community advocate, I strongly recommended and support that the process in terms of this space being functional, the council work jointly with TPOOW on an implementation plan immediately so that the work can commence

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):

Put in place an implementation plan for Residential Care Facility to open as soon as practicable and through the plan have objectives in place in reach within certain time frames

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	W+H	Date	12.08.2024
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	