

# APPLICATION FOR RESOURCE CONSENT

## FORM A: ADMINISTRATION

### NOTES

- You must fully complete both this cover form and all other related forms. Provide as much detail as you can. We request that, where possible, you provide electronic copies of any supporting information. Doing so may reduce administrative costs charged to you.
- Unless we advise otherwise, you should also consult with any person or party who may be interested in or affected by your proposal. You should provide details of this consultation, including written approval from these parties if possible. A form is available to help you with this, available on our website or by contacting our office.
- Failure to provide the required information and payment will delay the processing of your application. If you do not provide adequate information then we will not be able to process your application, and will return it to you. If you do not pay the required fees, we may stop processing your application until payment is received.
- If Purchase Order numbers are required for any future invoicing relating to monitoring and annual charges then this is the responsibility of the Consent Holder to provide.**
- Remember to sign and date all forms and email to [RM.Requests@waikatoregion.govt.nz](mailto:RM.Requests@waikatoregion.govt.nz) or by post to Waikato Regional Council, Private Bag 3038, Waikato Mail Centre, Hamilton 3240.**

**Please make sure you read and understand the information section at the end of this form. If you need any further help, please phone our Resource Use staff on 0800 800 401.**

### CONTACT DETAILS

#### 1. Applicant details

For **individuals**, you must provide the full names of all individuals (such as John Robert Smith and Mary Jane Williams).

For **companies and other incorporated entities** you must provide the company name and registration number. You must also provide the name of a person or persons who will represent your company and be responsible for the application.

For **partnerships and unincorporated entities** (such as private or family trusts or unincorporated societies) we must have the details of all authorised partners, trustees, members or officers. We may also request a copy of your society's rules to verify your status as a formal body or society.

|                                                                                                                          |         |           |
|--------------------------------------------------------------------------------------------------------------------------|---------|-----------|
| <b>Full name/s of applicant</b><br><i>This is the name/s that the consent will be issued to.</i>                         |         |           |
|                                                                                                                          |         |           |
| <b>Director / Minister / Chief Executive</b>                                                                             |         |           |
|                                                                                                                          |         |           |
| <b>Company registration number</b><br><i>We will not accept applications made in the name of unregistered companies.</i> |         |           |
|                                                                                                                          |         |           |
| <b>Applicant's postal address</b>                                                                                        |         |           |
|                                                                                                                          |         |           |
|                                                                                                                          |         |           |
| <b>Applicant's residential address</b><br><i>If different from postal address.</i>                                       |         |           |
|                                                                                                                          |         |           |
|                                                                                                                          |         |           |
| <b>Primary contact person/s</b>                                                                                          |         |           |
|                                                                                                                          |         |           |
| <b>Email address</b>                                                                                                     |         |           |
| <b>Phone number/s</b>                                                                                                    | Home:   | Business: |
|                                                                                                                          | Mobile: |           |

## 2. Application consultant/agent details *(if applicable)*

|                   |         |           |
|-------------------|---------|-----------|
| Name/company name |         |           |
|                   |         |           |
| Contact person    |         |           |
|                   |         |           |
| Postal address    |         |           |
|                   |         |           |
|                   |         |           |
| Email address     |         |           |
| Phone number/s    | Home:   | Business: |
|                   | Mobile: |           |

## 3. Partnership/Unincorporated entity details

For **partnerships** or **unincorporated entities** (such as private or family trusts or unincorporated bodies or societies) you must provide details of all authorised partners, trustees or members. Any consent granted will then include these names, and all individuals will be legally responsible for the consent and any associated costs. Should these persons change, then you must notify us.

|                                            |  |  |
|--------------------------------------------|--|--|
| Name of person                             |  |  |
| Status <i>(such as partner or trustee)</i> |  |  |
| Residential address                        |  |  |
|                                            |  |  |
|                                            |  |  |
| Name of person                             |  |  |
| Status <i>(such as partner or trustee)</i> |  |  |
| Residential address                        |  |  |
|                                            |  |  |
|                                            |  |  |
| Name of person                             |  |  |
| Status <i>(such as partner or trustee)</i> |  |  |
| Residential address                        |  |  |
|                                            |  |  |
|                                            |  |  |

*Include details of any further partners/trustees/members on a separate page if necessary.*

## 4. Who should we send application correspondence to?

☐ Applicant ☐ Consultant/Agent

Preferred address for service: ☐ Residential address ☐ Postal address ☐ DX number ☐ Email

**Note: all costs will be invoiced directly to the applicant**

## RESOURCE CONSENTS SOUGHT

### 5. Provide a brief description of the activity to which your application(s) relates

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### 6. Tick the type/s of resource consent/s you are seeking from Waikato Regional Council

If you are replacing any existing or previous consents, please also record the consent number(s) in the space below. Remember that for each consent application you must complete the relevant 'activity form' (Form B). Depending on the scale and complexity of your application(s), you may also be required to prepare a further supporting assessment of environmental effects (AEE).

|                       | RESOURCE CONSENT                                                                                                                                                                                     | PREVIOUS CONSENT NUMBER/S |
|-----------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|
| <input type="radio"/> | <b>Coastal permit</b><br>For activities that are within the coastal marine area (CMA).                                                                                                               |                           |
| <input type="radio"/> | <b>Discharge permit</b><br>For activities outside the CMA that may discharge contaminants into the air, water and onto or into land.                                                                 |                           |
| <input type="radio"/> | <b>Land use</b><br>For activities and structures outside the CMA that are on land, or in, on or over a river or lake bed, or may result in nitrogen discharges within the Lake Taupo catchment area. |                           |
| <input type="radio"/> | <b>Water</b><br>For activities outside the CMA that involve the abstraction, impoundment (damming), diversion and/or use of water.                                                                   |                           |
|                       |                                                                                                                                                                                                      | <b>CONSENT NUMBER/S</b>   |
| <input type="radio"/> | <b>Change to an existing consent</b>                                                                                                                                                                 |                           |
| <input type="radio"/> | <b>Location transfer of an existing consent</b>                                                                                                                                                      |                           |

**7. Are related consents required from other authorities (such as building or subdivision consents)?**

☐ Yes ☐ No

If **yes**, please provide details:

| CONSENT REQUIRED | CONSENTING AUTHORITY <i>(such as district or city council)</i> | DATE APPLIED | DATE GRANTED |
|------------------|----------------------------------------------------------------|--------------|--------------|
|                  |                                                                |              |              |
|                  |                                                                |              |              |
|                  |                                                                |              |              |
|                  |                                                                |              |              |
|                  |                                                                |              |              |
|                  |                                                                |              |              |

**8. Should your Waikato Regional Council application/s be granted, do you have a consent term or expiry date you would prefer for your consent/s?**

☐ Yes ☐ No

If **yes**, please provide details:

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**9. Do you agree to the Council extending RMA resource consent processing timeframes in any of the following circumstances? (Tick all that apply).**

*Extending timeframes – The Resource Management Act 1991 (RMA) specifies timeframes for processing consent applications (eg 20 working days for a non-notified application) however these timeframes can be extended when necessary; if we consider that “special circumstances” apply, or alternatively if the Applicant agrees.*

- ☐ Yes, provided that I can continue to exercise my existing resource consent until processing of this application is completed.  
(This applies to replacement applications only)
- ☐ Yes, provided the extension is for the purpose of discussing and trying to agree on resource consent conditions.
- ☐ Yes, provided that the application process is completed before this date \_\_\_\_\_
- ☐ No, not at this time.

Thank you for your response(s) above. Note that during the consent process a processing officer may still discuss with you any specific circumstance of your application to seek your approval for a timeframe extension, which may be for the above reasons or any other relevant reason.

## LOCATION

### 10. Where will the activity occur?

Where will the activity occur? You must supply a location map or diagram on a separate sheet of paper that shows the site of your activity and its local environment. This helps us determine what or who may be affected by your proposal. **Please show:**

- orientation (North arrow and scale)
- site location
- the location and name of the nearest road or state highway
- location/s of the activities for which you are applying for consent (such as points of water intake, points of discharges to air or water, areas for irrigation or disposal, areas of forestry, earthworks, tracking or filling, places of in-stream structures or in-stream works.)
- property boundaries and neighbouring properties (as well as neighbouring property owners' names)
- location and names of any nearby natural features such as geothermal activity, waterways, wetlands or wildlife habitats
- historic or waahi tapu sites

|                                    |  |
|------------------------------------|--|
| <b>Property address</b>            |  |
|                                    |  |
| <b>Legal description</b>           |  |
|                                    |  |
| <b>Name of closest road/street</b> |  |
|                                    |  |
| <b>Nearest settlement/town</b>     |  |
|                                    |  |

**Note:** Waikato Regional Council can help you create a base map to assist with your location plan. Please visit our website or call us on 0800 800 401 during office hours for assistance.

### 11. If the owner and/or occupier of the activity site differ from the applicant please provide their names and contact details

|                       |         |           |
|-----------------------|---------|-----------|
| <b>Owner name/s</b>   |         |           |
|                       |         |           |
| <b>Postal address</b> |         |           |
|                       |         |           |
|                       |         |           |
| <b>Email address</b>  |         |           |
| <b>Phone number/s</b> | Home:   | Business: |
|                       | Mobile: |           |

|                        |         |           |
|------------------------|---------|-----------|
| <b>Occupier name/s</b> |         |           |
|                        |         |           |
| <b>Postal address</b>  |         |           |
|                        |         |           |
|                        |         |           |
| <b>Email address</b>   |         |           |
| <b>Phone number/s</b>  | Home:   | Business: |
|                        | Mobile: |           |

## APPLICATION DEPOSIT / FEES

Please refer to the enclosed table to see whether your application requires a **deposit** or the **full fixed charge** amount to be paid when it is lodged.

| APPLICATION TYPE                                | CHARGE (incl GST)                           |
|-------------------------------------------------|---------------------------------------------|
| Bore Consent (controlled activity)              | \$546.25                                    |
| Mooring consent inside zoned mooring area (ZMA) | \$546.25                                    |
| Change to mooring                               | \$270.25                                    |
| <b>All other application types</b>              | <b>\$1,000.00 deposit for each activity</b> |

### Initial deposit - for other application types

You will be charged Waikato Regional Council's full actual and reasonable costs for processing this application. An initial deposit is required when you submit your application forms. This deposit requirement is \$1,000 for each activity you are seeking consent for (i.e. \$1,000 per each activity form B). This deposit helps cover our initial processing costs and will also help offset the total cost of your application/s. **Council does not provide an invoice for deposit payments, however, a receipt can be provided upon request.**

### Further deposit fee

If your proposal is likely to proceed to a hearing, then we will require a further deposit. This deposit may be up to 50 per cent of the estimated costs. You will be advised in writing at the end of the submission period if this is the case.

For complex proposals, you will generally receive an invoice on a monthly basis. This invoice will be for costs incurred in the previous month. For simple consents that are processed quickly, you will generally only receive one invoice. This will be sent to you at, or close to, the time that you receive our final decision on your application.

**If you do not pay the required fees, we may stop processing your application until payment is received.**

**We reserve the right to add all fees incurred in the collection of all monies payable and remaining unpaid after the expiry of the time provided for payment.**

**12. Total amount paid \$** \_\_\_\_\_

**Purchase Order Number** \_\_\_\_\_

**NB: PLEASE DO NOT PROVIDE ANY CREDIT CARD DETAILS OR BANK BALANCES FOR YOUR PRIVACY AS APPLICATION FORMS CAN BE PUBLICALLY SHARED.**

**Waikato Regional Council is no longer accepting cash or cheque payments. For internet banking / direct credit, please use the following details and please remember to complete the Payer particulars and reference sections as this will help us to identify your payment.**

PAY TO THE CREDIT OF **WAIKATO REGIONAL COUNCIL, ANZ, HAMILTON BRANCH**

| Name of account                 | Bank       | Branch         | Account No.          | Suffix       |
|---------------------------------|------------|----------------|----------------------|--------------|
| <b>Waikato Regional Council</b> | <b>0 6</b> | <b>0 3 1 7</b> | <b>0 0 9 6 4 4 2</b> | <b>0 0 0</b> |

### DETAILS TO APPEAR ON PAYEE'S BANK STATEMENT

Payer particulars (max 12 characters) **Debtor code / Site Address**

|  |  |  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|--|--|

Payer code (max 12 characters) **Applicant name**

|  |  |  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|--|--|

Payer reference

|          |          |          |          |          |          |          |  |  |  |  |  |
|----------|----------|----------|----------|----------|----------|----------|--|--|--|--|--|
| <b>R</b> | <b>C</b> | <b>A</b> | <b>P</b> | <b>P</b> | <b>L</b> | <b>N</b> |  |  |  |  |  |
|----------|----------|----------|----------|----------|----------|----------|--|--|--|--|--|

### 13. Provide details of relevant compliance history related to actions under the Resource Management Act 1991

*Previous compliance action against an applicant for a consented or unconsented activity anywhere in New Zealand may be had regard to in the consideration of your application. A failure to provide full and accurate information could have implications on any decision made relying on that information. A “natural person” refers to an individual as distinct from a company, corporation, or trust. Note where there is a private or family trust or unincorporated society, the information should be provided for each individual who is applying for resource consent representing that trust or society.*

**Select one** of the following statements, as applicable. If you are acting on behalf of the applicant, you must complete this section in relation to the applicant.

☐ I declare that I am not a natural person and that I have been the subject of the following abatement notices, enforcement orders, infringement notices, and convictions under the Resource Management Act 1991 [list all matters and the date and details of each in the table provided below or on separate pages. Enter ‘Not Applicable’ if there are no relevant matters]:

Or

☐ I declare that I am a natural person and that in the past 7 years I have been the subject of the following abatement notices, enforcement orders, infringement notices, and convictions under the Resource Management Act 1991 [list all matters and the date and details of each in the table provided below or on separate pages. Enter ‘Not Applicable’ if there are no relevant matters]:

| Date | Compliance Matter<br>(infringement notice, abatement notice, enforcement order, conviction) | Details<br>(include the region, site address, and a brief description of the activity to which the matter relates) |
|------|---------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|
|      |                                                                                             |                                                                                                                    |
|      |                                                                                             |                                                                                                                    |
|      |                                                                                             |                                                                                                                    |
|      |                                                                                             |                                                                                                                    |

### PRIVACY STATEMENT

The Resource Management Act (1991) requires this information to process the application and assist in managing the region’s natural and physical resources. Information in this application is regarded as **official information**.

Waikato Regional Council will hold this information, including all associated reports and attachments, and it is subject to the Local Government Official Information and Meetings Act 1987 and the Privacy Act 2020. The details may also be made available to the public. These details are collected to inform the general public and community groups about all consents which have been processed or issued through the council.

Under the Privacy Act 2020 you have the right of access to, and correction of, personal information held by the Waikato Regional Council.

## FINAL CHECKLIST

### 14. Have you? *(Please tick)*

- ☐ Filled in all parts of this form (Form A) and, either:
- ☐ Completed and attached all other related forms (Form B & Form C), or
  - ☐ Attached a full Assessment of Environmental Effects (AEE) report which covers all the requirements of RMA section 88 in proportion to the activity and its effects. By choosing this option you do not need to attach Form B and Form C to your application, however you are strongly advised to evaluate the information requested in Form B and C for the relevant activities being applied for, for inclusion of that information in your AEE. [Note: For Bore permits online application is available. For 'Swing Moorings in a Zoned Mooring Area', and 'Water Take and Use for Dairy Shed Purposes' inclusion of the specific Forms B and C with the application is recommended.]
- ☐ Applied for any district council consents that are also required for your proposal.
- ☐ Included a sketch or location map that shows us exactly where your activity will take place.
- ☐ Supplied a detailed assessment of environmental effects.
- ☐ Consulted with all interested and affected parties, and included their comments and/or written approval (if possible).
- ☐ Have you paid the required deposit/fee.
- ☐ Purchase Order supplied (if required for invoicing purposes).
- ☐ Declared relevant compliance history.
- ☐ Carefully read the Privacy Statement.

**Please remember to email your application to [RM.Requests@waikatoregion.govt.nz](mailto:RM.Requests@waikatoregion.govt.nz) or by post to Waikato Regional Council, Private Bag 3038, Waikato Mail Centre, Hamilton 3240.**

**If you have already dealt with Waikato Regional Council staff regarding your proposal, please advise their name/s**

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## DECLARATION

### 15. Declaration

I/we hereby certify that, to the best of my knowledge and belief, the information given in this application is true and correct. I/we also undertake to pay all actual and reasonable costs incurred by Waikato Regional Council in the processing of this application.

**Signature of applicant or applicant's agent** \_\_\_\_\_

**Date** \_\_\_\_\_

### **Consent holder costs - all consents**

Once granted, most resource consents will also incur a yearly 'consent holder' fee and compliance monitoring charges. Please contact us if you have any queries regarding your deposit/fee or processing costs or the yearly charges for your activity.

### **Consultation**

Consultation with other parties who may be interested in or affected by your activity is encouraged. This involves discussing your activity with others who may have some concerns, listening to what others have to say, considering their responses and deciding what will be done.

If you have carried out your consultation before you submit your application to Waikato Regional Council we will require details of it. In many cases, the provision of written approval from other affected parties will help streamline the processing of your application and may help avoid the necessity for public notification.

### **Ongoing responsibilities**

If your application is granted you will be responsible for complying with your consent's conditions and payment of your consent's charges until your consent expires. If you wish to cancel (surrender) your consent, transfer responsibility to another party or make changes to your consented activity before it expires, you must submit notice to us in writing or make an application to change your consent.

### **MORE INFORMATION**

For more information on the application process or resource consents, visit our website at [waikatoregion.govt.nz](http://waikatoregion.govt.nz) or phone our Resource Use staff on **0800 800 401**.