



FORM 10

APPLICATION FOR CHANGE AND/OR CANCELLATION OF CONDITION OF RESOURCE CONSENT

For office use only:

Date Received _____

Application Number _____

Receipt Number _____

Amount Paid _____

Date Paid _____

Under Section of 127 of the Resource Management Act 1991.

Completing this form:

This form provides us with your contact details, and details about your proposed change or cancellation of a condition of a resource consent and its actual and potential effects on the environment. Note that all the information provided in your application is available to the public.

We recommend that you talk your proposed change or cancellation through with council staff before you fill in this form. You should also contact us if you are unsure which forms you should be using, or if you need help with filling in any of the forms. We can be contacted on (06) 327 0099 or 0800 422 522.

It is important that you answer all questions fully.

Fees may apply please, please refer to the current Fees and Charges document for further information.

CONTACT DETAILS

Applicant(s) name(s) (in full) and address:

Business phone: _____

Private phone: _____

Mobile phone: _____

Fax number: _____

Email: _____

Service name and address for contact during the application process (if different from above):

Business phone: _____

Private phone: _____

Mobile phone: _____

Fax number: _____

Email: _____

Billing name and address for invoices (if different from above):

Business phone: _____
Private phone: _____
Mobile phone: _____
Fax number: _____
Email: _____

Property owner's name and address (if different from above):

Business phone: _____
Private phone: _____
Mobile phone: _____
Fax number: _____
Email: _____

LOCATION OF THE ACTIVITY

Location of the activity and/or property address: _____

Valuation Reference (from your rates notice): _____

Legal Description (from your rates notice): _____

**DESCRIPTION OF THE PROPOSED CHANGE AND/OR CANCELLATION OF
CONDITION/S**

The application relates to the following resource consent _____

The application relates to the following conditions of the above-stated consent _____

The proposed change/s to this/these condition/s is/are as follows _____

SIGNATURE

I hereby certify that, to the best of my knowledge and belief, the information given in this application is true and correct. I undertake to pay all actual and reasonable application costs incurred by the Rangitikei District Council.

Signature of Applicant or person authorised to sign on their behalf:

_____ Date: _____

IMPORTANT

You must pay the charge payable to the consent authority for the application to change or cancel a condition of a resource consent under the Resource Management Act 1991.