

**FURTHER SUBMISSION IN SUPPORT OF, OR OPPOSITION TO,
SUBMISSION ON PUBLICLY NOTIFIED PROPOSAL FOR PLAN CHANGE
Clause 8 of the First Schedule of the Resource Management Act 1991
(Form 6)**

To: Waipa District Council, Private Bag 2402, Te Awamutu
 101 Bank Street, Te Awamutu 23 Wilson Street, Cambridge
 Ph 07 872 0030 Fax 872 0033 Ph 07 823 3800 Fax 07 823 3820
 Email: submissions@waipadc.govt.nz

****Please note all sections of the following form need to be completed****

NAME OF PERSON MAKING FURTHER SUBMISSION:

Full Name:.....
 Address:.....
 Postal Address For Service:.....
 Phone:..... Email: Fax:.....
 Contact Person (name and designation if applicable).....

THIS IS A FURTHER SUBMISSION IN SUPPORT OF OR OPPOSITION TO A SUBMISSION ON A PROPOSED PLAN CHANGE TO THE WAIPA DISTRICT PLAN:

Name of Proposed Plan Change:

I SUPPORT OR OPPOSE THE SUBMISSION OF:

Name of original submitter:.....
 Address:.....
 Submission Number:.....

Support Oppose (please tick)

INDICATE WHICH PARTS OF THE ORIGINAL SUBMISSION YOU SUPPORT OR OPPOSE, TOGETHER WITH ANY RELEVANT PROVISIONS OF THE PROPOSAL:

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THE REASONS FOR MY SUPPORT OR OPPOSITION TO THE SUBMISSION ARE:

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I SEEK THAT THE WHOLE (OR PART) OF THE SUBMISSION BE ALLOWED (OR DISALLOWED): *(give precise details ie describe exactly what part of the submission you wish to be allowed or disallowed)*

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DO YOU WISH TO BE HEARD IN SUPPORT OF YOUR FURTHER SUBMISSION?

Yes No (please tick)

IF OTHERS MAKE A SIMILAR SUBMISSION I WILL CONSIDER PRESENTING A JOINT CASE WITH THEM AT THE HEARING?

Yes No (please tick)

SIGNATURE:

To be signed by submitter or person authorised to sign on behalf of submitter
(NB. A signature is not required if you make your submission by electronic means).

Signed:.....
Date:.....

Note to person making further submission:
A copy of your further submission must be served on the original submitter within 5 working days after lodging the further submission with the local authority.