



# Land Use Consent

## Natural Environment, Lands & Heritage Applications

Sections 9, 11 and 12 of the District Plan respectively

Cameron Road  
Private Bag 12803  
Tauranga  
Phone: 07 571 8008  
Fax: 07 5779820  
customer@westernbay.govt.nz  
www.westernbay.govt.nz

### Guide for Applicants (Please detach for your future reference)

#### Have you provided?

1.  Five copies of your application and attachments. (Note: If five complete copies are not supplied, actual time and cost for administration and photocopying will be charged and requires payment before the resource consent can be issued).
2. Plans drawn to scale including:
  - Site plan that identifies the property boundaries.
  - Any buildings (highlighting all proposed building/s).
  - Distances to boundaries (between all structures and boundaries).
  - Vehicle Entrance, Driveway, Turning Circle and On-site Manoeuvring.
  - Floor plan.
  - Identification of topography.
  - Identification of any natural, landscape and heritage features e.g. native bush, water course, wetlands etc.
  - Any proposed earthworks/ground re-contouring.
  - Any relevant existing landscaping and proposed landscaping.
3.  Elevation Drawings or photos of any existing buildings.
4.  Please provide examples (swatches) of exterior colours that are to be used.
5.  Application Form fully completed including Assessment of Environmental Effects
6.  Application Fee – You don't have to pay an application fee unless there are other planning issues also associated with this application e.g. yard encroachment, additional dwelling etc in which case the relevant fee shall be applied.

All of the above information must be supplied with your application. **Pursuant to Section 88(3) of the Resource your application may be rejected if the information and application is incomplete.** You have the ability, under Section 88(5), to object to the decision to reject your application, if applicable. Non Notified applications take up to 20 working days to process, once accepted. Notified applications can take up to 70 working days to allow for statutory notification time and convening of a Hearing and Consents Committee meeting.

Please do not hesitate to contact the Duty Planner at our Barks Corner Office (07) 571 8008 or 0800 726 732 if you require any assistance. Our postal address is Private Bag 12803, Tauranga.

**In accordance with s36(3) of the Resource Management Act 1991, Council will be recovering and charging for those processing costs over and above the application lodgement (minimum) fee already paid. Please note that this may or may not pertain to your particular application and will only apply where the fixed lodgement fee is exceeded. Please note that in accordance with Council policy, Council will not issue your consent approval to you until all processing costs have been paid.**



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## Natural Environment, Landscape & Heritage Applications

### Office Use Only

#### Criteria for Acceptance: Counter and Postal Applications

#### Application

<b>Page 1</b>	<b>Q1</b>	Application Details completed in full	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	<b>Q5</b>	Legal Description	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	<b>Q9 &amp; 11</b>	Address for Service – Owner or Agent	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	<b>Q12-18</b>	Assessment of Environmental Effects	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	<b>All Pages</b>	Check all questions answered and application fee provided	<input type="checkbox"/> Yes	<input type="checkbox"/> No

#### Guide for Applicants

<b>Q2</b>	Check that plans drawn to scale indicate:			
	a)	Site plan that identifies the property boundaries	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	b)	Any other buildings (highlighting the proposed building)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	c)	Distances to boundaries (between all structures & boundaries)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	d)	Vehicle entrance, turning circle, and on-site manoeuvring	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	e)	Floor plan	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	f)	Identification of topography	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	g)	Identification of any natural features e.g. native bush, water course, wetlands etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	h)	Any proposed earthworks/groun re-contouring	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	i)	Any relevant existing landscaping and proposed landscaping	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Q3</b>	Elevation Drawings or if the building is being resited, photos		<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Q4</b>	Example of Colours		<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Q5</b>	Application fee, not payable unless other planning issues to process		<input type="checkbox"/> Yes	<input type="checkbox"/> No

**Note: If any criteria indicates "NO", the application may be incomplete (Section 88 (3) RMA 1991)**

#### Planner's Assessment

Is the application complete?

Yes     No

DATE  
STAMP  
(if accepted as  
complete)

If incomplete the reasons are:

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#### Reference of Advice to Applicant

Date: \_\_\_/\_\_\_/\_\_\_

Letter Reference: \_\_\_\_\_



# Land Use Consent

Natural Environment, Landscape & Heritage Applications

## 1. Applicant Details

First Name/s: \_\_\_\_\_

Surname: \_\_\_\_\_

First Name/s: \_\_\_\_\_

Surname: \_\_\_\_\_

## 2. Postal Address

\_\_\_\_\_  
\_\_\_\_\_

## 3. Contact Details

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

## 4. Land Use Consent Application for:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## 5. Property Details

\_\_\_\_\_ *Number*                      \_\_\_\_\_ *Road/Street*

## 6. Legal Description

\_\_\_\_\_ *Lot*                      \_\_\_\_\_ *DP9S), SO or ML (Please State)*

## 7. Valuation Roll Number

\_\_\_\_\_ *From Rates Slip*



**8. I am** *(Please tick that which is applicable)*

The  Owner     Occupier     Lessee     Potential Owner  
 Agent Acting for Owner     Other \_\_\_\_\_

**9. Owner Details**

First Name/s: \_\_\_\_\_

Surname: \_\_\_\_\_

Postal Address \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_                      Mobile: \_\_\_\_\_

Fax: \_\_\_\_\_                         Email: \_\_\_\_\_

**10. Payment Details** *Note: Only where applicable (if not the applicant):*

Name and address of person liable for application processing fees/refunds (where applicable).

A minimum fee is payable on lodgement of all applications. In some cases, this will be the whole cost of the application. In other cases a further invoice will be issued at the time of the decision (s36 Resource Management Act).

**i) Application processing fees**

Name and address for accounts/refunds:

First Name/s: \_\_\_\_\_

Surname: \_\_\_\_\_

Postal Address \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_                      Mobile: \_\_\_\_\_

Fax: \_\_\_\_\_                         Email: \_\_\_\_\_

Signature of person responsible for the payment of any invoices associated with the process of this application:

..... Date:.....



**ii) Financial Contribution Payments *(if not the applicant)***

Name and address for accounts/refunds:

First Name/s: \_\_\_\_\_

Surname: \_\_\_\_\_

Postal Address \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Mobile: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Signature of person responsible for the payment of any invoices associated with the process of this application:

..... Date:.....

**Note:** Some applications will be charged a financial contribution or incur additional processing fees. In these circumstances the name and address of the person responsible for the **payment** of the financial contribution or further invoices **must** be included, and their signature provided in this section of the application form. Please note that by signing section 10(i) of this application form you are agreeing to be responsible for payment of invoices, and by signing section 10(ii), for the payment of any financial contribution that may validly be charged. In addition to meeting the costs of any financial contribution and/or other invoices you will be liable to pay all costs and expenses of debt recovery and/or legal costs incurred by the Council of and incidental to enforcement of any debt.

**11. Address for Service of Agent *(if not the applicant)***

First Name/s: \_\_\_\_\_

Surname: \_\_\_\_\_

Postal Address \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Mobile: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

*(Note: It is mandatory to provide an accurate address for service and contact phone details)*

**Applicant's Signature**

..... Date:.....

*To be signed for or on behalf of the applicant*